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Progress Report on Homelessness in Hamilton 2003

May 2003

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- Ruth Cameron, Supporting Families in Transition
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- Gay Walton, Solutions for Housing Action Committee
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EXECUTIVE SUMMARY

Homelessness is a growing crisis in Hamilton. Every night, people sleep outside. Every night, hundreds of people stay in emergency shelters. Every night, families with children are placed in motel rooms because they have nowhere else to go. Others sleep on the couch or floor of a friend or relative; many more have their own place, but pay so much of their income on rent that even a minor crisis could lead them to lose it. The people with these experiences do not conform to any particular stereotype of who a "homeless" person is, but they all fall under the definition of someone who is homeless. In trying to address and end the crisis of homelessness, we must consider those different realities.

The long-term solutions to this crisis are ensuring that everyone in Hamilton has an adequate income, and that everyone can access safe and affordable housing. For many people, accessing housing means having additional supports provided. For many others, emergency and other support services in the community are an important step on the path to permanent housing. Long term solutions mean that we also address the specific groups who are more likely to experience homelessness, those who are marginalized in our community because of racism, sexism, and other forms of oppression.

This *Progress Report on Homelessness in Hamilton (2003)* is intended to further update the community's condition of homelessness and report on the progress being made to address it. It was *not* our mandate to evaluate any specific program, organization, or funding stream. That being said, the resources brought into this community by the Government of Canada's National Homelessness Initiative, including the SCPI and UAS-H funding, have had a major impact on progress responding to homelessness and are focused on in this Report. Over the three years of this initiative, $12.9 million was provided under SCPI, along with $915,365 to the Aboriginal community under the Urban Aboriginal Strategy—Homelessness Initiative, and $2.1 million to address homelessness amongst youth. This is in addition to the ongoing funding that many organizations receive to address related issues in the Hamilton community.

What did the research find?

We found that there has been progress made in certain areas addressing the crisis of homelessness in Hamilton. Two components of the Government of Canada's National Homelessness Initiative: the Supporting Communities Partnership Initiative (SCPI) and the Urban Aboriginal Strategy - Homelessness (UAS-H) have enabled much of this progress. This included increased and strengthened emergency services, innovative prevention projects, community planning and research, and more transitional housing. We found that there has been an overall lack of progress addressing the long term solutions to homelessness: reducing poverty, having an adequate supply of affordable housing options, having adequate supports to maintain housing. We also found that there needs to be increased focus on addressing racism and other systemic issues that contribute to an increased risk of homelessness. This short form of the *Progress Report* summarizes the information provided in the full report into three categories: what is the state of the crisis, what progress has been made, and where is there still work to do (or where have we not seen progress.

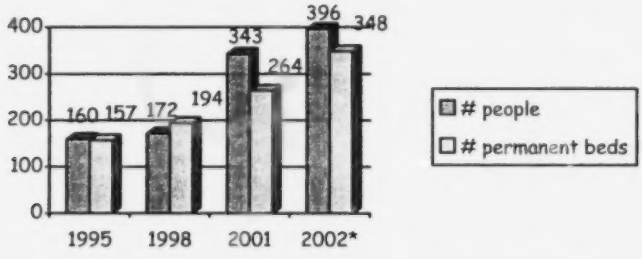
The State of the Crisis

⇒ **Emergency shelter usage has increased in Hamilton**
⇒ **Women's shelters, at capacity, are turning more women away**
⇒ **Homelessness affects marginalized groups differently**
⇒ **The social housing waiting list has increased**
⇒ **Outreach workers report worsening conditions on the streets**

Emergency Shelters

On any given night in November 2002, 396 people were staying in emergency shelters in Hamilton. This is an increase of 15% from November 2001, and an increase of 124% from 1998. The following graph shows emergency shelter usage and the number of emergency shelter beds available since 1995. These estimates are not a count of homeless people in Hamilton. Emergency shelter use likely represents only one third of people experiencing homelessness. The more common experience is for people to stay with friends or family on an emergency basis. Local research by McKibbon (2001) estimated that over the course of the year in 1998 in Hamilton, approximately 6,000 different people experienced homelessness, and he estimated that, due to increasing poverty, in 2001 the number may have exceeded 13,000.

Number of people accessing emergency shelters and permanent beds available on a given night in November in Hamilton

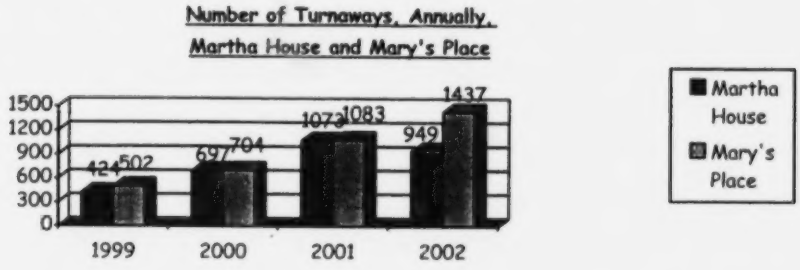


Source: SPRC Emergency Shelter Usage Survey, 2002; Report Card on Homelessness 2002.

**On the night of the SPRC survey, Inasmuch House had 8 fewer beds due to construction. The total number of beds available generally is 356.*

Women's Shelters

Women continue to be turned away nightly because of high demand at Women's shelters. Turnaways were reported at all emergency shelters for women on the nights the data was collected. The following graph gives annual information for Martha House and Mary's Place.



Source: Good Shepherd Women's Services, 2002; Report Card on Homelessness 2002

Issues of Access and Equity

All people are not at equal risk of poverty or of homelessness. Racism, sexism, and other forms of oppression result in disadvantaged groups experiencing increased poverty, decreased access to housing, and decreased access to services, all of which are risk factors for homelessness. This *Progress Report* found that many people in our community, particularly recent immigrants, refugees, and racially visible people are experiencing high needs and are experiencing barriers to services and to accessing housing.

"I'm going be out on my own soon. I'm trying to decide what to do in my life. After hearing about all this discrimination, I'm worried I might not be able to find a place, because I'm young, and not just because I'm an Indian." - focus group for street-involved youth.

Social Housing

The waiting list for social housing has increased from 3,300 households in 2001 to over 4,200 households in 2002 - an increase of 28%. An average of 116 households were successfully housed each month in 2002 - this is an increase of 12% from 2001 when the average was 104 households. People experiencing homelessness qualify for special disadvantaged status on the waiting list. Their numbers nearly doubled in 2002, from a monthly average of 218 households in January to 404 in December. Every month approximately 10 households who were homeless were housed.

Outreach Worker Experience

Outreach workers described some of the changes they have seen over the last few years in a focus group held to gather information for this *Progress report*:

"Four years ago it was maybe a little unmanageable, but as the years have gone on we have needed more people to do the work because there are more people out there"

"...on that street, there are people living in cars and vans, not just occasional but 3 or 4 people doing so regularly...for a fair amount of time...that's significant, when people can only afford to live in their car"

"[We're] seeing more seniors and families on the streets, didn't see it as often before...also seeing immigrant populations - any population is someone who is homeless now".

"...the status quo is not acceptable. The situation is abhorrent, and should never have been allowed to become the status quo." (all quotes in Neigh, 2003).

Where has there been progress made?

⇒ **Increased emergency shelter and transitional housing**
⇒ **New homelessness prevention services**
⇒ **Addressing concerns specific to Aboriginal homelessness**
⇒ **More research**
⇒ **New partnerships developed**
⇒ **More affordable housing resources allocated**

Increased Supply of Emergency Shelter and Transitional Housing

There has been an increase in the supply of emergency shelter, transitional housing, and supported housing in Hamilton in the last two years. Some of these spaces are already in place, and some will be completed over the next year. The following table includes both current and projected increases:

Supply of Emergency Shelter Beds In Hamilton Mar 2000 - Nov 2002

Shelter or Drop-In	# Beds and mats Mar 2000	# Beds and mats Nov 2002	Total Increase, Mar 2000 - Nov 2002	# Additional beds (pending construction)
Wesley Centre (35 men, 20 women)	50 mats	55 mats	5 mats	--
Salvation Army Booth Centre (men)	54	113	59	--
Mission Services Men's Centre (men)	45	72	27	--
Good Shepherd Men's Centre (men)	25	40	15	--
Martha House (women)	28	28	--	--
Mary's Place (women)	9	9	--	11
Native Women's Centre (women)	11	11	--	4
Interval House (women)	20	20	--	--
Inasmuch House (women)	28	28*	--	9
Notre Dame (youth - 10 male, 10 female)	20	20	--	--
Wesley/Living Rock Temporary Youth Shelter (10 male, 5 female)	Not operating	15 **	15 **	--
Out of the Cold (15 men, 10 women)	Not operating	25 mats	25 mats	--
Totals	**240 beds 50 mats**	**356* beds 80 mats**	**116** beds 30 mats**	**24 beds**

**Inasmuch House temporarily had 8 reduced beds in November 2002 due to construction, but has a capacity of 28 beds. **The Wesley /Living Rock Youth Shelter is a temporary youth shelter funded with SCPI funding.*
Source: Community Action Plan on Homelessness 2000; City of Hamilton, Hostels and Lodging Unit.

This table does not include the new, 20 unit emergency family shelter funded by SCPI, with ongoing funding from the Province of Ontario and the City of Hamilton. It also does not include the 10 unit temporary family shelter funded through SCPI.

The supply of transitional and supported housing also increased. In the last year, there have been 137 additional spaces for men[1], 8 additional spaces for women, and 2 units for seniors at risk of homelessness. There were an additional 12 units of supported housing added by the HOMES program and 25 rent supplements for people with severe and persistent mental illness.

New Services to Prevent Homelessness

SCPI funding has contributed to innovative programs which have prevented greater homelessness in the community. Some examples of these are: a homelessness prevention for Aboriginal youth with Fetal Alcohol Spectrum Disorder, trusteeship programs which serve over 500 people every month, an expanded emergency loan program, a free moving and storage program which helped over 700 families move to more stable housing, a tenant education program to help people understand their rights as tenants and prevent evictions, a project intended to empower street-involved youth to find and maintain stable housing, a project to provide emergency motel accommodation with supports for homeless families, and several projects that offer supports to maintain housing for tenants who are at risk of homelessness.

Progress Addressing Aboriginal Homelessness

While Aboriginal people make up only 2% of the Hamilton population, they make up at least 20% of the homeless population. There have been 3 projects funded through the SCPI dollars: an early intervention project for Native Youth, partial funding for a new Native Women's Centre and an emergency intervention project to prevent homelessness. The Urban Aboriginal Strategy funded 12 different projects which were focused on providing emergency supports to people experiencing homelessness, preventing greater homelessness, or doing public education related to homelessness. Our research also found some progress being made on partnerships between mainstream and Aboriginal agencies, as well as increasing Aboriginal representation on committees doing work related to homelessness.

Research Done on Homelessness in Hamilton

The *Progress Report* found that there had been 15 recent reports done on issues related to homelessness in Hamilton. These reports will serve as tools for this community's efforts to address the growing crisis.

[1] These units had previously existed, but three years ago were re-designated as student housing. This increase is actually a return to the status quo of several years ago.

New Partnerships

The SCPI funding served as a catalyst for organizations to partner to deliver services. Many of these partnerships involved direct service delivery and included initiatives to prevent greater homelessness.

The City of Hamilton's Housing Division and the Federal government have allocated funds to create new affordable housing.

City Council has approved the Social Vision for the City of Hamilton. One of the flagship initiatives of the Social Vision is the creation of affordable housing. The City of Hamilton Housing Division has a proposed plan to create an adequate supply of affordable housing in Hamilton. It has allocated $1.5 million to its Housing Partnership Fund. The city also has a $100,000 Housing Hamilton Innovation Fund to pioneer and stimulate innovative rental housing solutions. Housing Hamilton has been given $1.4 million to develop new affordable rental housing. The recent Federal/Provincial Housing Agreement will provide 700 units of rental housing in Hamilton over the next 4 years.

What are the challenges?

- ⇒ **Addressing systemic barriers to housing, income, and services (for racially visible people, immigrants, refugees, women, people who are lesbian/gay/bisexual/transgender, those with mental and physical disabilities)**
- ⇒ **Increasing poverty**
- ⇒ **More transitional, supported, and affordable housing required**
- ⇒ **Aboriginal issues must be addressed**

Addressing Systemic Barriers

Many people affected by homelessness are members of disadvantaged groups in our community, including, recent immigrants, refugees, racially visible people, Aboriginal people, women, people who are gay, lesbian, bisexual, and people with mental and physical disabilities. Most of these groups experience higher than average poverty rates and decreased access to housing and services due to racism, sexism, homophobia, ableism and other forms of oppression. As a result, many are at higher risk of homelessness. Certain specific barriers identified in our research included an inadequate supply of housing that is affordable and accessible for people with physical disabilities. Racially visible people, immigrants and refugees have decreased access to mainstream services like food banks, emergency shelters, and health care because of lack of language and cultural interpretation, a lack of knowledge of mainstream services, cultural insensitivity and experiences of racism, and inadequate staff training. Hamilton is the third largest destination in the country for newcomers to Canada. From March 2002 to March 2003, 3,360 recent immigrants and refugees arrived in Hamilton. Nearly 1,000 were refugee claimants, who were not eligible for income supports until their claim was accepted under the authority of the Canadian Immigration Act. Refugees often arrive in Canada with few resources, putting them at particular risk of homelessness.

Our survey showed that 64% of groups and organizations do not make information available in languages other than English or French. Additionally, 35% of groups and organizations did not have any anti-racism, anti-harassment, or anti-discrimination policy in effect. Most policies did not deal with systemic issues, and most were not accompanied by implementation plans. All people who identified as lesbian, gay, or bisexual in the community consultation reported incidences of discrimination in the context of housing or service provision.

Increasing Poverty in Our Community

Between 1994 and 2000 the percentage of households with low incomes in Hamilton has increased. There has also been a 40% increase the number of families with annual incomes less than $10,000 (from 5,100 to 7,150 families), and a 103% increase in the number of families earning more than $100,000 (from 10,930 to 22,260 families). Income inequality is considered by some academic writers to be a cause of homelessness.

We found increasing reliance on food banks and meal programs over the past 3 years. In the last year, the number of people accessing food banks increased by 15%. A recent survey of over 300 food bank users found that 81% of parents go without food, often or sometimes, so their children can eat. The survey also found that more than 1/3 of children in families who access food banks do not have enough to eat at some time in the month (Hamilton Foodshare, forthcoming).

"A lot of the people I work with at [local donut store] are single moms who have trouble feeding their kids. [This store] used to let us take home food that they were going to throw away; I used to take bagels home so that I could feed my kids. At [the store] we're not allowed to take food home anymore" - woman quoted in Neigh, 2003.

In spite of the increasing need, social assistance rates and minimum wage remain unchanged.

Social assistance rates and minimum wage are not adequate to meet basic needs. Ontario Disability Support payments have not received a cost of living increase in the last ten years. The minimum wage has not been increased since early 1990's. The research showed that Ontario Works and full-time minimum wage income continues to be inadequate to cover the cost of housing, food, and other basic necessities.

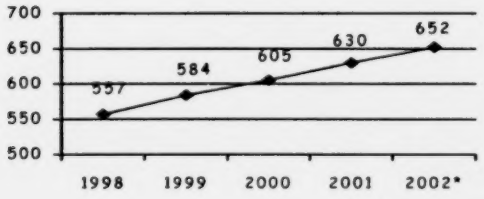
"You can't afford to live on social assistance. The government justifies the low levels of social assistance by saying that people can use food banks" - woman at risk of homelessness, quoted in Neigh, 2003.

There has been a lack of progress creating a range of safe, affordable housing options in this community.

There is a lack of affordable housing options in Hamilton. Transitional housing is needed by recent immigrants, refugees, youth, women leaving abusive relationships, and seniors. While supported and supportive housing remains a highly effective model of housing for people with a long history of homelessness and severe mental illness, there are not enough new units in

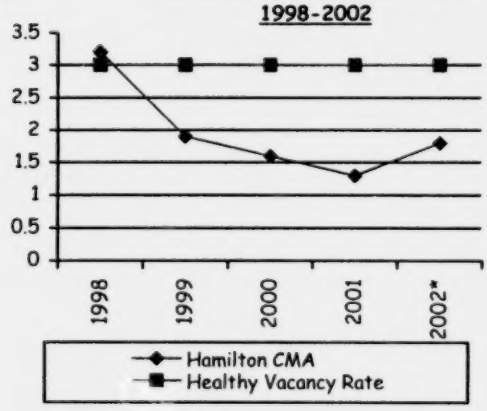
Hamilton. The waiting list for subsidized housing continues to grow and there have been no new units added in response. The rental market in Hamilton continues to be very competitive. Vacancy rates are below healthy levels established by the Canada Mortgage and Housing, and rents are rising faster than the standard of living.

Average Rents City of Hamilton 1998-2002



Source: CMHC Rental Market Survey 2000,2002,
** = New City of Hamilton*

Vacancy Rates, Hamilton CMA, 1998-2002



Source: CMHC Rental Market Survey 2000,2002,
** = New City of Hamilton*

We found the quality of much rental housing that was available to low-income tenants was inadequate and unsafe.

The issues surrounding Aboriginal homelessness must be addressed through the Aboriginal community.

Our research found that we must address the issue of homelessness differently for the Aboriginal community. The long history of homelessness, genocide, and residential schools has resulted in Aboriginal people being highly over-represented among people experiencing homelessness as well as poverty. Understanding and acknowledging this history is a first step in addressing Aboriginal homelessness. The second step involves adequately supporting the efforts of the Aboriginal community to take action on the issues of homelessness. In addition, there are continued challenges including: a lack of quantitative information about Aboriginal homelessness, Aboriginal agencies being overextended, and access to funding for solutions to homelessness. Plans for the solutions to Aboriginal homelessness have been laid out in the planning document The Homelessness Trail: Voice of our People, and require support from the entire community. Long-term solutions to Aboriginal homelessness must be Aboriginal driven, conceived, and delivered.

Where do we go from here?

The SCPI funding has demonstrated that, when resources are provided, this community is very capable of developing and implementing innovative solutions to the homelessness crisis. The information gathered for this *Progress report*ed found that there has been progress in certain areas related to homelessness: increased emergency shelter spaces, increased transitional housing, innovative prevention programs and community research. In order to build on this

progress, this funding should be increased and made permanent. Provincial and municipal governments should also increase funding dedicated to ending homelessness and creating safe, affordable housing for everyone.

The findings of this *Progress Report* also show a lack of progress in long-term solutions: reducing poverty, creating affordable housing, providing adequate supports for people to maintain housing, and addressing racism and other forms of oppression which create additional risks for disadvantaged groups. The community must continue its hard work to address these areas. But, long-term solutions to the homelessness crisis will not be found solely at the community level. Municipal, Provincial and Federal governments must take responsibility for adequately funding the range of solutions that are required to end the present crisis.

The recommendations that have been made in previous reports on homelessness should be implemented. In addition to those recommendations, the Homelessness Evaluation Committee has made recommendations related to Services, Issues of Access and Equity, Poverty, Housing, and Aboriginal Issues. These recommendations occur throughout the *Progress Report*, and are summarized at the conclusion of the document.

1.0 INTRODUCTION

Homelessness is a growing crisis in the City of Hamilton. Every night hundreds stay in emergency shelters. Every week, thousands access food banks and meal programs. The Social Planning and Research Council (SPRC) of Hamilton has been working in partnership with community organizations since 1998 to monitor this crisis. This *Progress Report on Homelessness in Hamilton* builds on previous SPRC work, most recently the *Report Card on Homelessness in Hamilton (2002)*, but also going back to the report *Our Homes and Our Streets: Homelessness in Hamilton-Wentworth (1999)*, and the *Community Action Plan on Homelessness in Hamilton (2000)*. This report also complements the Aboriginal community's work: *The Homelessness Trail: Voice of Our* People (2001) and the *McMaster/HEDAC Program Evaluation (Freeman, 2002)*. The funding for this *Progress Report* comes from the Government of Canada's Supporting Communities Partnership Initiative (SCPI) and the Urban Aboriginal Strategy - Homelessness (UAS - H).

The *Report Card on Homelessness (2002)* had two components: an update of trends related to homelessness, and an evaluation of progress made on recommendations in the *Community Action Plan* on Homelessness. The findings of the trends section indicated growing conditions of homelessness in the community. The findings of the second section found that there was good progress being made implementing the recommendations in the *Community Action Plan*. It found that much of the progress was concentrated in the area of emergency services and supportive services for people experiencing homelessness. It also found that the SCPI funding was a key factor in progress that was made. The *Report Card* identified that the recommendations around poverty, discrimination, and a lack of affordable housing had not made progress, and were fueling increased homelessness in the community. It concluded with recommendations in the following areas[2]:

- Addressing poverty and discrimination locally
- Increasing support to, and participation by, disadvantaged groups in our community to find community-specific solutions to homelessness
- Exploring local solutions to poverty and food security
- Ongoing funding for services related to homelessness
- Provincial and Federal strategies to reduce poverty and increase affordable housing options in the community.

This *Progress Report on Homelessness in Hamilton (2003)* is intended to further update the community's condition of homelessness and report on the progress being made to address it. It was *not* our mandate to evaluate any specific program, organization, or funding stream. That being said, the resources brought into this community by the Government of Canada's National Homelessness Initiative, including the SCPI and UAS-H funding, have had a major impact on progress responding to homelessness and are focused on in this Report. Over the three years of this initiative, $12.9 million was provided under SCPI, along with $915,365 to the Aboriginal community under the Urban Aboriginal Strategy—Homelessness Initiative, and $2.1 million to address homelessness amongst youth. This is in addition to the ongoing funding that many organizations receive to address related issues in the Hamilton community.

[2] See Appendix C for full recommendations from Report Card on Homelessness, 2002.

This *Progress Report* includes progress made over the last two years, and will include some information that was included in the *Report Card on Homelessness in Hamilton.*

This *Progress Report* was produced at the Social Planning and Research Council of Hamilton. The SPRC is a mainstream community agency with core funding from the United Way and the City of Hamilton. The actual writing of this report was done by three authors who have never experienced absolute homelessness. In other words, the social space in which this report was produced is one of relative privilege, and is largely different from many of the spaces that this report is about. This means we had to develop a number of methods to help us[3].

The first step in developing this *Progress Report* was to form the Homelessness Evaluation Committee. Committee members were involved in service delivery, research, or funding around homelessness (see the Acknowledgments for a complete list of members). Efforts were made to facilitate inclusion of people who are experiencing, have experienced, or are at risk of homelessness. This committee met monthly to review the findings of the research, and to guide the development of recommendations. This committee was responsible for setting the Assumptions and Guiding Principles, as well as the Evaluation Goals and Objectives (see Appendix A).

The Homelessness Evaluation Committee set the following goals for this report:

- To understand and work with the community's capacity in relation to homelessness and affordable housing in Hamilton.
- To evaluate Hamilton's overall progress addressing homelessness with a particular focus on actions taken, impacts, gaps, and current state of the community and communicate these findings to the community.
- To integrate throughout the evaluation the voices of people, groups, and communities who are historically excluded due to racism, sexism, heterosexism (including homophobia), ageism (which affects both youth and seniors), ableism (as experienced by people with both physical and mental disabilities), classism, and the oppressions experienced by Aboriginal people, and immigrants and refugees.
- To incorporate an understanding of the unique conditions and causes of Aboriginal homelessness in Hamilton.
- To ensure people who are experiencing, have experienced, and are at risk of homelessness are involved in all phases of the evaluation.

[3] See Appendix B for a detailed methods section.

To accomplish these goals, the research for this *Progress Report* was based on:

- an extensive consultation with over 150 people experiencing or at risk of homelessness (24 focus groups and 35+ interviews)[4];
- a survey of 81 groups and organizations in Hamilton doing work related to homelessness
- a number of key informant interviews with community leaders, front line and outreach workers
- a review of the project files for SCPI projects to identify progress and community impacts;
- local and regional statistics from service providers and government agencies; and
- a review of recent local and regional reports related to homelessness.

In this report we found there had been progress made addressing homelessness in Hamilton, particularly in emergency services, programs to prevent homelessness, transitional housing, and community planning and research. At the same time, we found that long-term solutions to homelessness went largely unaddressed. The root causes of homelessness: increasing poverty, a serious shortage of affordable housing options, continued discrimination against disadvantaged groups in the community, and a lack of supports to help people maintain the housing they had, are driving more and more people into homelessness.

In this work, we heard that as a community, we must understand and acknowledge the history and unique conditions of Aboriginal homelessness. The long history of homelessness, genocide, and residential schools has resulted in an urban Aboriginal population that is highly over-represented in the homeless population. Solutions to Aboriginal homelessness must begin with adequately funded Aboriginal-specific services, and must involve distinct strategies that take place through the Aboriginal community.

We also heard that this community has serious work to do on issues related to access and equity. Racially visible communities, women, people who are gay, lesbian, bisexual or transgender, and people with disabilities (mental or physical), people who are poor, Aboriginal people, youth, seniors, recent immigrants, and refugees continue to face systemic barriers to accessing housing, income, and services. Reducing these barriers is imperative so that everyone in our community who is at risk of homelessness, and experiencing homelessness is able to access the housing, income, and services that are needed.

As the Homelessness Evaluation Committee constantly reminded us, the endpoint for which we all strive must be nothing less than an end to homelessness in Hamilton. This document, therefore, is intended to help understand where we have come from and where we are now, and to shape action in the community that will contribute to the realization of that goal. We are convinced that the crisis of homelessness can be solved. Please read this report with that goal in mind. Some of the analysis in this report might be seen as being critical of certain sectors, funders, and governments. However, this is not the focus of our work. Instead, our intent is to paint a picture of this crisis in our community in order to challenge us collectively to continue finding innovative and creative solutions, both short-term and long-term, to bring an end to homelessness.

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[4] This document was published separately as Neigh, 2003, but is used extensively in this report.

With that end in mind, we hope this document (and various shorter versions of it) will be distributed to the many and varied spaces in the community which can be sites for action, including but not limited to:

- funding bodies
- community agencies
- government departments
- politicians' offices
- activist groups
- faith communities
- organizations based in specific racially visible communities
- neighbourhood associations
- media outlets
- businesses
- other sites occupied by people experiencing or at risk of homelessness.

1.1 How to Read this Report

This report is divided into six sections based on the sections of the *Community Action Plan*. The first section describes some indicators of the current crisis of homelessness. The next sections describe progress and challenges in services, issues of access and equity, addressing poverty, and housing. The final section on Aboriginal Issues is intended to educate the non-Native reader on the long history of homelessness in the Aboriginal community, and factors that contribute to the current over-representation of Aboriginal people among the homeless population in Hamilton. This *Progress Report* concludes with a summary of recommendations.

While progress and challenges are separated for the purposes of readability and being able to summarize areas of progress, they must be considered together in order to understand the overall scope of the crisis of homelessness. For example, the section on transitional housing identifies in progress that there have been an additional 134 units for men, and an additional 8 units for women. Under challenges in transitional housing, the overall shortage of transitional housing is identified for women, recent immigrants, refugees, youth, seniors, and other groups in the community. Much of the context that surrounds the progress being made is identified and discussed in terms of ongoing challenges.

2.0 WHO IS HOMELESS IN HAMILTON?

In Hamilton, every night, people sleep outside. In Hamilton, every night, people sleep in emergency shelters.

There are others who sleep on the couch or the floor of friends or relatives. Many more have their own place, but pay so much of their income on rent that even a minor crisis could lead them to lose it.

The people who have these experiences do not conform to any particular stereotype of who a "homeless person" is. They are people with many different identities, existing in many different spaces in the community. Any effort to understand homelessness, to support those who experience it, and to struggle to end it must consider these different realities.

We must consider a family which came to Canada from Cambodia as refugees, with a mother who worked on a mushroom farm to support herself and her children until an injury caused her to lose her job and her housing, so that they are now living in a two-bedroom apartment with another family.

We must consider a woman who wants desperately to take herself out of reach of an abusive husband, but who stays because she knows women's shelters are full, and transitional housing for women fleeing violence is even more so.

We must consider an Aboriginal man who was driven from high school by curriculum that made his history invisible, and racist behaviour by peers and teachers, who receives Ontario Works but can't find an apartment that costs less than 80% of his monthly cheque, leaving him no money for food.

We must consider the gay youth kicked out of his home at 16 because of his sexual orientation, and told by staff in the youth shelter where he stays not to talk about the fact that he is gay, because it will just cause trouble.

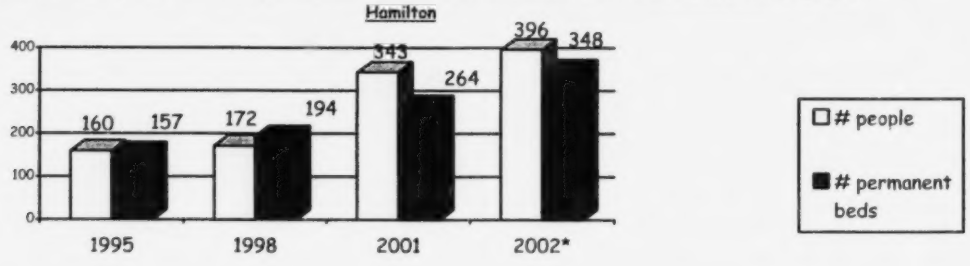
We must think of all of those who have lived in institutions and have been discharged into the community with no support; all those who live in housing with exposed wires or no heating because they can't afford anything better; all those who face racism built into the systems and procedures of organizations that are supposed to be helping them; all those who could continue to live independently with a few hours of home care a week, but cannot do so because of service cuts; all those with disabilities who have seen their rent go up every year, like clockwork, but haven't seen their disability income increase in over a decade; all those ready at last to enter addiction treatment who can't because the program is full; all those women who trade sex for housing, because they see no other choice; all those newcomers to Canada who have skills and an eagerness to work, but whose credentials and experience are disregarded because they were obtained somewhere else.

We must, in short, see all of the different spaces from which people experiencing or at risk of homelessness in Hamilton come. We must look carefully at the spaces they must get to—spaces of adequate income, of safe, adequate, and affordable housing, of various support services—and investigate what barriers exclude them from those spaces. In doing this we must start from a point of recognizing that historical and current oppressions mean that some groups of people in society—Aboriginal people, other racially visible people[5], immigrants, refugees, youth, women, people with mental health issues, seniors, people with physical disabilities, and people who are gay, lesbian, bisexual, or transgender—disproportionately experience barriers to resources, security, and well-being.

2.1 The Current Crisis Of Homelessness In Hamilton

Between 1998 and 2001 there was a 99% increase in shelter usage on a given night in Hamilton (up from 175 in 1998 to 343 people in November 2001). In November 2002, 396 people were staying in emergency shelters on a given night in Hamilton – an increase of 15%. Other local research recently completed for the City of Hamilton estimated that in 1998, 6,000 different people experienced homelessness in Hamilton (McKibbon, 2001). The same research also estimated that in 2001, due to increasing poverty, that number could have exceeded 13,000. Of the 12 shelters we surveyed in 2002, 10 were regularly at or over 90% capacity – some of these exceeded 115% capacity *(SPRC Emergency Shelter Usage Survey, 2002)*. Appendix E gives statistics for individual shelters and drop-ins. The number of emergency shelter beds has increased by 65% since 1998. This increase has allowed for more people who are experiencing absolute homelessness to access the support provided by emergency shelters. Where the number of people staying in shelters exceeds the number of beds available, the people were sleeping on mats in emergency shelters.

Chart 1: Number of People Accessing Emergency Shelters and Permanent Beds Available on a Given Night in Hamilton



Source: SPRC Emergency Shelter Usage Survey 2002; Report Card on Homelessness 2002
**On the night of the SPRC survey, Inasmuch House had 8 fewer beds due to construction. The total number of beds available generally is 356.*

[5] This report deliberately avoids the euphemism "visible minority". While "racialized groups" (e.g. in Galabuzi 2001), "racialized communities", or "subordinate racialized groups" (e.g. in Smith 2003, prepared for the Strengthening Hamilton's Community Initiative) are preferable because they avoid the incorrect notion that numerical minority status is a necessary component of the experience of racism, and they include the idea of racialization--that significance and the experience of oppression are assigned on the basis of superficial physical difference through social processes (Miles 1989)--this report uses the more commonly understood "racially visible".

Recent research in Hamilton also shows that the majority of people who are experiencing homelessness do *not* use emergency shelters. The Housing Help Centre's analysis of people accessing their service estimated that overall only 1/3 of people experiencing homelessness were actually using emergency shelters (Hafner, 2003). "Hidden homelessness", or staying with friends or family on an emergency basis, is far more common. Information from the Community Housing Access Network, presented in these graphs also found that only 1/3 of people who were experiencing homelessness were staying in emergency shelters or drop-ins.

Chart 2: CHAN Applications w/ Homeless Status 2002 by Age (n=203)

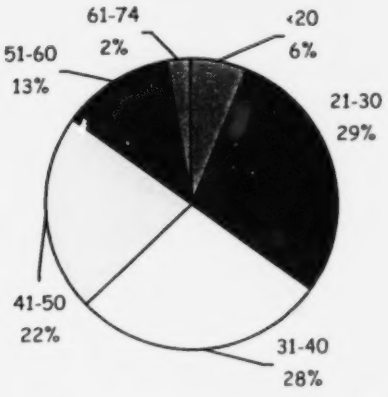
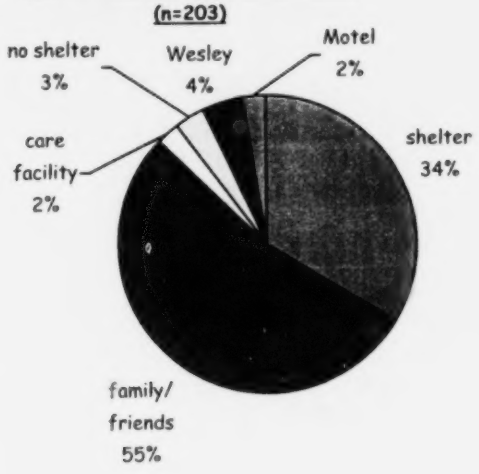


Chart 3: CHAN Applications w/ Homeless Status 2002 by Location (n=203)



Source: Program Data, Community Housing Access Network, Jan-June 2002

Racially visible associations are also providing high levels of service to people who are experiencing or are at-risk of homelessness but have difficulty accessing shelters because of barriers. Most associations do not name the problem as "homelessness" but themes from interviews carried out with six organizations[6] were remarkably similar: all key informants responded that there were huge needs in their communities, and that poverty was forcing families into over-crowded conditions and shared apartments. These are experiences of hidden homelessness. One of the key informants reported that, in addition to hidden homelessness, there was absolute homelessness. He reported that people were being forced to stay overnight in the Hamilton Mosque because they had nowhere else to go.

[6] Key informants from non-Aboriginal racially visible associations were contacted from the Khmer Association, Hamilton Chinese Community Resource Centre, Jamaica Foundation, Afro-Canadian Caribbean Association, the Hamilton Muslim Association, and the Hamilton Sudanese Association. See Appendix B for information about the Methods.

Aboriginal people make up 2% of the population in Hamilton, yet one of the drop-ins has estimated that between 22%-26% of people who stay overnight are Aboriginal. Three of the twelve emergency shelters surveyed keep regular statistics on how many Aboriginal people use their services. In these three shelters, Aboriginal use ranges from 0%-18% of all clients on a given night. One of the men's emergency shelters estimates that 15% of clients are Aboriginal. In general, these statistics are based on visual identification and are under-representing the total number of Aboriginal people accessing emergency services. Most emergency shelters do not keep statistics on Aboriginal people who use their services.

Youth have been noted as one of the fastest growing sub-populations of the homeless population (Mayor's Action Task Force, 1999). In Hamilton, outreach workers also reported that they were seeing more youth on the street (Neigh, 2003). When we spoke with youth, they told us some of the barriers to permanent housing they faced:

"In the current housing market it's hard to find a place - made worse when you have no income, and there is a lack of jobs..."

"I'm going to be out on my own soon. I'm trying to decide what to do in my life. After hearing about all this discrimination, I'm worried I might not be able to find a place, because I'm young, and not just because I'm an Indian. They probably just think I'm going to party all the time"

"I got kicked out of my foster home because I was gay"

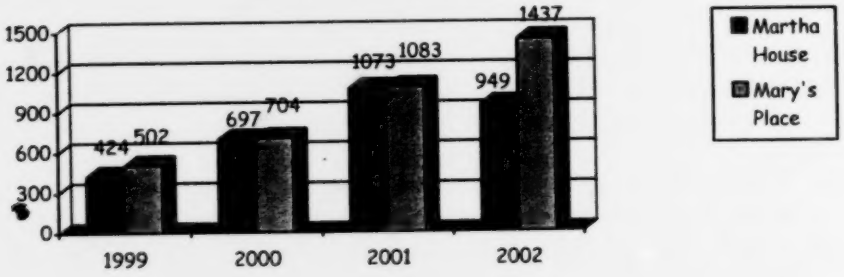
*"There's enough apartments, just not enough people who are willing to rent to us" (*all quotes in Neigh, 2003).

The John Howard Society, with SCPI funding, has been actively researching the employment needs of street-involved youth and has identified some trends among that population. Their research, based on 250 surveys of street-involved youth[7], found that young women outnumbered young men, that education levels were generally low, and that barriers to finding employment were high (Powles & Donahoe, 2001). This confirms other local program data gathered at the Living Rock drop-in for youth. This program data found that Aboriginal youth were over-represented among street-involved youth (16%-22%), over 80% of youth had not completed high school, 4% reported full-time employment, and 22% reported no income source at all[8]. The increasing occurrence of pregnancy and teens with children was noted in both data sources.

Women's shelters have been at capacity since the SPRC began surveying shelters in 1998. (Appendix E gives specific information on women's shelters.) Turnaways at Mary's Place increased by 33% from 1,083 in 2001 to 1,437 (an average of 4 per night) in 2002.

[7] For this research, youth was defined as anyone aged 16-25.
[8] The source for this data is the program database at Living Rock Drop-In. Total entries = 390.

Chart 4: Number of Turnaways, Annually, Martha House and Mary's Place

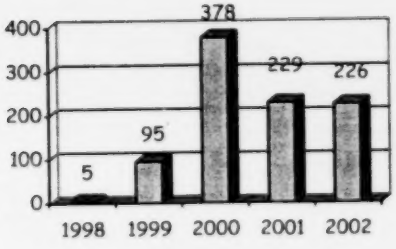


Source: Good Shepherd Women's Services, 2002

Many women are forced to resort to emergency shelters because they are escaping violence. On a given night in November 2002, approximately 65% of women accessing emergency shelter were there because they were escaping violence. Women who are escaping violence require specialized supports including increased security to prevent further violence from the abuser, and professional counseling due to the physical, emotional, and psychological, trauma they have experienced.

Only recently has there been an emergency family shelter in Hamilton, but the number of families who are homeless has risen significantly over the last 5 years. As one outreach worker reported: "*[We're] seeing more seniors and more families on the streets, didn't see it as often before*". Until the temporary family shelter opened in August 2002, the only option for families who were homeless was emergency motel accommodation provided by the City of Hamilton. Most of these families were single parent families (77%) - but do not meet the criteria for women's shelters (e.g. have a boy over 12). Sixty-four percent of people staying in emergency motels in Hamilton are children in families (444 out of 696)[9].

Chart 5: Number of Families in Emergency Motels by the City of Hamilton, by Year



Source: City of Hamilton, Hostels and Lodging Unit, 2002

While there was a 45% decrease in the number of families in motels since the peak year in 2000, the number of families in emergency motels has remained considerably higher than the levels seen five years ago.

The increase in families in the year 2000 reflects an increase in awareness of the hotel placement program as well as increased rents and evictions. The decrease following 2000 was due to more active case management that was able to find other locations for families to stay.

[9] City of Hamilton, Hostels and Lodging Unit, 2002.

The City of Hamilton also reports that recent SCPI funded projects: The Temporary Family Shelter and Supporting Families in Transition Program, have helped to keep the numbers lower. *(personal communication, City of Hamilton, May 2003)*

People who are paying more than 50% of their income on housing are living in "relative homelessness". *The Report Card on Homelessness (2002)* found that 17,000 tenant households in Hamilton were in this category. This number had risen from 10,000 tenant households in 1990.

The *Mayor's Action Task Force on Homelessness (1999)* identified that refugee claimants are particularly vulnerable to homelessness. Government sponsored convention refugees receive a basic living and accommodation allowance from the Federal government, but refugee claimants do not have access to financial assistance until their claim has been accepted under the authority of the Canadian Immigration Act, at which time they are eligible for social assistance *(Mayor's Action Task Force, 1999)*. Hamilton is the third largest destination in the country for newcomers to Canada and is a large center for secondary migration because of its proximity to Toronto. Settlement and Integration Services Organization reports that 3,360 recent immigrants and refugees arrived in Hamilton between March 2002 and March 2003. Of these, 921 were refugee claimants and many face the increased risks of homelessness mentioned above.

The faces of homelessness in Hamilton are changing. They are more varied, with many different stories, and come from many different contexts. Our understanding of homelessness must evolve as well, and take into account the myriad of factors and systemic barriers that can result in someone experiencing homelessness. Our ability to respond to the crisis of homelessness depends on our understanding of who is at risk of, and who is experiencing, homelessness in Hamilton.

The current techniques for gathering information about homelessness in Hamilton does not allow us to know how many different people experienced homelessness over the course of a year. It does not allow us to know how many people were homeless for a week, and how many people were homeless for six months. It does not tell us how many people were Aboriginal, or refugee claimants. This knowledge is crucial in order to develop focused, appropriate responses for the crisis of homelessness. The Homelessness Evaluation Committee identified that the collection of information should contribute to the monitoring of the crisis of homelessness.

The Homeless Individuals and Families Information System (HIFIS) is Canada's national electronic data management system. It is aimed to facilitate the collection and reporting of data on the homeless population, locally and nationally. HIFIS is in the process of being implemented at many of the emergency shelters and in some residential care facilities, and should be used to improve our understanding of homelessness in Hamilton.

RECOMMENDATION A: A lead organization should be identified and funded to facilitate a community-wide strategy for improving routine data collection about homelessness in Hamilton. These changes should increase the amount and utility of that information without unduly burdening front-line workers. This should be done in consultation with experts on access and equity, experts in information technology, the Aboriginal community, other racially visible communities, the women's services community, people who are lesbian, gay, bisexual, or transgender, and people with disabilities. This information should contribute to the ongoing monitoring of the homelessness crisis in Hamilton.

The *Community Action Plan on Homelessness* recommended that the Plan be updated annually to reflect progress and emerging issues. While substantial resources have been allocated to evaluate community progress, a current community action plan will ensure that the community effort to end homelessness is coordinated, up to date, and informed.

RECOMMENDATION B: The Community Action Plan should be updated annually and should be used to coordinate the community effort to end the crisis of homelessness. Resources should be allocated to support the annual update and monitoring of the Plan, as well as to facilitate action on recommendations in the Plan.

2.2 The Connection Between Homelessness and Health

The physical impacts of being homeless on a person's health are severe. People who are homeless are at higher risk for infectious disease, premature death, and chronic health problems than the general population (Mayor's Action Task Force on Homelessness, 1999). This situation is made worse because of poor nutrition, deep poverty, poor hygiene, and a higher risk of experiencing violence.

But to fully understand the connection between health and homelessness, we must expand the definition of health beyond the "absence of disease". The World Health Organization states "health is not merely the absence of disease. It is a state of well-being which encompasses psychological, social, physical, emotional and spiritual elements"[10]. Homelessness has impacts beyond physical health. There are social, emotional, and mental effects of being homeless or at risk of homelessness that undermine a person's well-being. In the community consultation, people identified the some of the impacts of being homeless:

"When you are homeless, there is no way to describe it, it is an emptiness there. You don't know where you'll get your next meal."

"The government says, 'they're in our parks and on our streets'. When did 'we' become 'they'?" (in Neigh, 2003).

People experiencing, or at risk of homelessness reported mental stress, depression, alienation, and hopelessness. These effects of homelessness represent great risks to a person's health and

[10] Quoted in Hamilton Urban Core Community Health Centre, 2002. Informational brochure.

well-being. They can undermine a person's self-esteem and have long lasting consequences. The City of Hamilton, *Social and Health Issues Report (2001)*, identified that

> *health is not an end in itself, rather, it is a means to employment, income, and well-being. It is now accepted that a broad range of social, economic and environmental factors influence individual and population health. For example, health and wealth are inextricably linked, where one influences the other (p.4).*

Some of the factors that influence health and well-being are: housing, income, education, access to services, employment, food security, mental health and personal safety[11]. For people who are at risk of, or experiencing homelessness, the sense of well-being will deteriorate in the absence of safe and affordable housing.

The response to the increased health risks that are caused by homelessness should also include a broad range of activities intended to improve the community's health, or health promotion. The *Ottawa Charter on Health Promotion (1986)* defined health promotion as:

> *The process of enabling people to increase control over, and to improve, their health. To reach a state of complete physical, mental, and social well-being, and individual or group must be able to identify and realize aspirations, to satisfy needs, and to change or cope with the environment. Health is a positive concept emphasizing social and personal resources, as well as physical capacities. Therefore, health promotion is not just the responsibility of the health sector, but goes beyond healthy lifestyles to well being (World Health Organization, 1986).*

When a person is experiencing homelessness, their whole life is spent trying to meet basic needs: finding a place to sleep and finding food to eat. Under those circumstances it is very difficult, if not impossible, to stay "healthy". Efforts to improve the health and well being of people experiencing homelessness must involve access to safe affordable housing. It must also increase the control that people have over conditions in their lives, and ensure that there is equity and social justice in the community *(Hamilton Urban Core Community Health Centre, 2002).*

[11] Hamilton Urban Core Community Health Centre, 2002.

3.0 SERVICES RELATED TO HOMELESSNESS

The *Community Action Plan on Homelessness* made a series of recommendations in 2000 to strengthen the support services available for people experiencing or at risk of homelessness. We gathered information by reviewing SCPI project files, conducting an organizational survey, key informant interviews with community leaders, conducting focus groups, and gathering local statistics. This section presents the progress that has been made in strengthening support services as well as the challenges that remain.

3.1 Progress

3.1.1 Progress Related To Emergency Shelters

Shelters have been expanded, or are planned to expand, with SCPI funding in an attempt to accommodate the number of people seeking emergency shelter. SCPI funding has also allowed the strengthening of the operation of the Wesley Centre, which provides emergency accommodation for between 50 - 60 men and women per night. In sum, when these additions are completed, and if the temporary youth shelter can be sustained, there will be approximately 380 permanent emergency shelter beds and 80 mats for singles in Hamilton. This is an increase of 142% since 1995 - and does not include the new shelter for families. The following table identifies the increase in emergency shelter beds over the last two years.

Table 1: Supply of Emergency Shelter Beds In Hamilton Mar 2000 - Nov 2002

Shelter or Drop-In	# Beds and mats Mar 2000	# Beds and mats Nov 2002	Total Increase, Mar 2000 - Nov 2002	# Additional beds (pending construction)
Wesley Centre (35 men, 20 women)	50 mats	55 mats	5 mats	--
Salvation Army Booth Centre (men)	54	113	59	--
Mission Services Men's Centre (men)	45	72	27	--
Good Shepherd Men's Centre (men)	25	40	15	--
Martha House (women)	28	28	--	--
Mary's Place (women)	9	9	--	11
Native Women's Centre (women)	11	11	--	4
Interval House (women)	20	20	--	--
Inasmuch House (women)	28	28*	--	9
Notre Dame (youth - 10 male, 10 female)	20	20	--	--
Wesley/Living Rock Temporary Youth Shelter (10 male, 5 female)	Not operating	15 **	15 **	--
Out of the Cold (15 men, 10 women)	Not operating	25 mats	25 mats	--
Totals	240 beds 50 mats	356* beds 80 mats	116** beds 30 mats	24 beds

**Inasmuch House temporarily had 8 reduced beds in November 2002 due to construction, but has a capacity of 28 beds. **The Wesley /Living Rock Youth Shelter is a temporary youth shelter funded with SCPI funding.*

Source: Community Action Plan on Homelessness 2000; City of Hamilton, Hostels and Lodging Unit.

These additional spaces represent not only a commitment from the SCPI funding, but also an ongoing commitment from both the City of Hamilton and the Province of Ontario. These two governments are responsible for funding the operational costs associated with shelter beds.

The services offered through emergency shelters and drop-ins have also been strengthened. Two of the men's shelters and The Wesley Centre have responded to the increased demands by using SCPI funding to add case management positions. More training has occurred for Emergency shelter and drop-in front line staff including seminars on CPR, Bereavement, Mental Health Issues, and regulations around the Ontario Disability Support Programme.

3.1.2 Progress Addressing Services For Youth

There is a strong network of agencies and organizations working to address youth homelessness in Hamilton. The coordination of these agencies will be increased with the development of the Street Involved Youth Network, which is a new committee for agencies working to address youth homelessness. The SCPI youth funding has contributed to new innovative programs, including a new, temporary youth shelter that provides accommodation for up to 15 youth (10 male, 5 female), and was over 90% capacity at the time of the SPRC survey.

Some other projects include:

- the MAC Door: a pilot project with 25 street - involved youth to empower them to identify strategies to leave the street and secure housing

- additional outreach services at Alternatives for Youth focused on youth and addictions intended to increase knowledge regarding substance use/abuse, harm reduction, and treatment options

- a peer support group for street involved youth called the Stepping Stone, which will continue after SCPI funding ends.

- an early intervention program for Fetal Alcohol Spectrum Disorder (FASD) at the Aboriginal Health Centre which will work with up to 75 Aboriginal youth to access employment and support services to prevent homelessness as well as raising awareness of FASD in the Native and non-Native communities.

- The Young Parent WRAP program: a prevention program for young parents at risk of homelessness that is based on a partnership of five agencies led by the Children's Aid Society to provide wraparound services.

- an expanded health clinic and food service area at the Living Rock youth drop-in.

3.1.3 Progress In Services For Women

SCPI and other government funding will increase the supply of women's emergency beds from 96 to 120[12]. This will begin to address the limitations of the space in women's shelters. There has been funding allocated to build a new Native Women's Centre, a new Good Shepherd Women's Services Shelter (replacing and expanding Martha House and Mary's Place), and the Ontario Ministry of Community, Family, and Social Services has allocated funding to create nine additional beds at Inasmuch House. When these renovations and expansions are completed, there will be an increase of 24 emergency beds for women[13].

3.1.4 Progress In Services For Families

The need for a permanent family shelter was identified in the *Community Action Plan*, and the recently announced 20 unit family shelter represents a significant investment in providing service to families who are homeless. In addition to the capital funding from SCPI, the Province of Ontario and the City of Hamilton will fund the permanent family shelter's ongoing costs, which are approximately $1 million. There are also more families who have been helped by new programs and initiatives funded by SCPI to provide supports, which include the 28 families[14] who stayed at the SCPI funded temporary family shelter; the 148 families who have received supports and emergency motel accommodation with the Supporting Families in Transition program; the 192 families who have received supports from the Young Parent WRAP program to prevent homelessness; 41 families who received supports from the Children's Aid Society to prevent homelessness; and 900 families who received emergency vouchers to prevent homelessness from the Native Women's Centre. The following is one case study from the temporary family shelter from the SCPI project files:

[This was a] family that moved from Stratford, to Thunder Bay to Hamilton, and wanted to move to Niagara. While in the [temporary housing] unit, they got connected with Ontario Works and straightened out issues from previous moves. The husband obtained full-time employment and the wife was looking into returning to school. They connected with St Matthews House who has been helping with clothing and food...and they now have an apartment and will be enrolling the 5 year old in school and the 3 year old in day care". - SCPI Project Files, City of Hamilton.

3.1.5 Progress In Aboriginal Services

There have been three projects funded through the SCPI dollars: an early intervention project for Native Youth, partial funding for a new Native Women's Centre and an emergency intervention project to prevent homelessness. The Urban Aboriginal Strategy funded 12 different projects which were focused on providing emergency supports to people experiencing homelessness, preventing greater homelessness, or doing public education related to homelessness.

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[12] This does not include the services that offer overnight accommodation to both men and women – Wesley Centre, Out of the Cold, and the youth shelters.

[13] Progress for transitional housing for women is discussed under Housing.

[14] These community impacts were collected in January 2003. The number of families has increased since then.

3.1.6 Progress In Services for Seniors

The Homelessness Intervention Project, administered by St. Matthew's House has established two transitional units for seniors at risk of homelessness. The program has also provided supports to over 700 seniors in order to help maintain their housing.

3.1.7 Progress in Health Care

As discussed in Section 2, housing is one of the key determinants of health. Without safe affordable housing, a person's sense of well-being will deteriorate. For that reason, access to health care and community health programs are a crucial piece of the response to homelessness. This section deals primarily with health care and the provision of health care services, rather than health and well-being. *The Community Action Plan* made several recommendations around the health care needs of people experiencing homelessness: expanding health care outreach services, expanding oral health care (dentistry) services, and reducing barriers to access health care services.

The organizational survey conducted for this *Progress Report* found that community based health centres continue to find innovative ways to promote community health, deliver health care, and link people with housing. The increased funding available through SCPI has enabled the expansion of some existing programs. Some of the new or expanded projects delivered through community health centres include[15]:

- The Aboriginal Health Access Centre (De Dwa De Dehs N>ye) has increased its outreach for people experiencing homelessness, by providing emergency food and supplies. It also partnered with the Living Rock Youth Drop-In to establish a Health Centre at Living Rock. The Health Centre is staffed by a nurse practioner from the Aboriginal Health Centre, as well as being a center used for health promotion among youth.
- The Francophone Community Health Centre has a new housing links program which helps members of the Francophone community locate and maintain housing
- The North Hamilton Community Health Centre supports community gardens to contribute to local food security
- The Hamilton Urban Care Health Centre has been able to expand its Street Drop-In and ID Clinic, strengthen its primary care outreach programs, and chiropody (foot care) programs. Some additional community health programs include an annual health street fair, different skill building groups, a meal program that served over 12,000 meals last year, the Community Oral Health Program, and over 90 day lockers for storage.
- The Hamilton Urban Care Health Centre has also expanded its primary health care outreach services in a partnership with the Wesley Centre that provides increased nurse practioner time on site at the Wesley Centre.
- The Salvation Army Booth Centre was able to hire one full time registered nurse to work with people experiencing absolute homelessness.

[15] Projects listed were reported in the Organizational Survey.

Additional projects related to health are:

- The City of Hamilton's Community Health Bus which provides primary health care and dental services to people at risk of, or experiencing homelessness. Over an 8-month period in 2002, the Health Bus served 1,926 people.
- The Salvation Army Soup Van which provides emergency food and outreach services to people experiencing absolute homelessness. Through SCPI funding, the Soup Van was able to continue its services for nearly 160 people per night.
- COAST (Crisis Outreach and Support Team) continues to provide 24 hour emergency service to people who need crisis assistance with a particular focus on serious mental illness. They report that roughly 4% (461 out of 10,000) of these contacts have no fixed address or are living at an emergency shelter.
- The Assertive Outreach Team, administered by the City of Hamilton, Public Health and Community Services, in partnership with community organizations, has seen 31% more clients over the last year (434 in 2001 - 568 in 2002). The Assertive Outreach Team plays a very important role in connecting people experiencing homelessness with different services and housing that can improve their overall health.

A research project by the McMaster School of Nursing titled *A Community Action Plan for Health and Homelessness,* funded by SCPI, is expected to provide comprehensive information about the health status and health care needs of people who are homeless in Hamilton. This report is due to be released in the Summer of 2003.

3.1.8 Progress in Programs to Prevent Homelessness

Community organizations have developed creative and innovative programs to prevent greater homelessness in our community and keep people in housing. The SCPI program has been the driving force behind many of these projects. As the SCPI program draws to a close, many of these programs will serve as successful pilot projects or models for future programs to reduce homelessness.

Among these are[16]:

- voluntary trusteeship programs at the Salvation Army, Good Shepherd Centre, and Mission Services that have provided trusteeship service to over 500 clients monthly.
- The Housing Emergency Loan Program expanded the number of emergency loans it could offer to an average of 12 per month over the last two years
- The Salvation Army's Moving and Storage Program that had helped over 700 families move (through October 2002) and provided 89 storage lockers for daily storage for people experiencing absolute homelessness.

[16] These are projects that are related to supportive services and prevention. SCPI projects are also mentioned in emergency shelter usage, Aboriginal Issues, transitional housing, and Food Security. Appendix G lists and describes all of the SCPI – funded projects. Information was obtained through the City of Hamilton's Homelessness Unit.

- a program to help access utility grants through the Salvation Army which facilitated 163 applications to Share the Warmth
- the Tenant Education Program, administered by the Housing Help Centre, and guided by the Solutions for Housing Action Committee, to help people understand their rights as tenants, organize tenants' associations, and prevent evictions by producing a tenant education video in 5 languages, wrote, produced, and distributed brochures, and provided direct support to tenant associations
- a pilot project by the Children's Aid Society which has helped 41 families remain intact and avoid intervention by the CAS by providing temporary hotel accommodations while housing is cleaned and repaired and supports put in place. The Ministry of Family, Community, and Social Services will continue the pilot project and extend it to other jurisdictions.
- Hamilton FoodShare has expanded our capacity to deliver food security and prevent homelessness by increasing food resources, and the ability to receive and store donated supplies.
- The ROOFS program, administered by Hamilton Housing Corporation has added supports to help over 150 at-risk tenants maintain their housing and prevent evictions by providing a range of supports including one-to-one support (over 3,500 individual meetings), community kitchens, peer support groups, and forming of tenant associations.

3.1.9 Progress in Developing Partnerships

The Hamilton community has a long history of working in partnership to address the crisis of homelessness. Committees such as the Hamilton Executive Directors Aboriginal Coalition (HEDAC), Solutions for Housing Action Committee (SHAC), Hamilton Coalition for Social Justice, and the Food and Shelter Regional Advisory Committee are all examples of the willingness of the community working together to address social problems. The recent National Homelessness Initiative emphasized partnerships in service delivery.

In Hamilton, the Community Advisory Board on Homelessness also emphasized partnership and collaboration around service delivery when considering proposals for funding. Partnerships between Aboriginal and mainstream agencies was also identified as a recommendation in the *Homelessness Trail (2001)*.

Some partnerships are inter-agency steering committees (Tenant Education Project, Housing Emergency Loan Program), others are working groups that have been established on particular issues (the Street Involved Youth Network). The SCPI and Aboriginal projects have also allowed some programs to identify long-term partnerships to stabilize vital community services (Second Stage Housing amalgamation with Family Services).

There are also innovative partnerships happening in service delivery. Some of these partnerships are new, while other projects strengthened existing partnerships. Some of these projects will end with the sunset of SCPI funding this year, but the benefits of forging these partnerships will bolster the community effort to address homelessness in the future. Some examples of partnered service delivery projects are:

- The Supporting Families in Transition program delivers a coordinated approach to delivery of services to families that are homeless or at risk of homelessness. The four partner agencies are: Settlement and Integration Services Organization, Hamilton Urban Core Community Health Centre, Housing Help Centre and St. Matthew's House.
- The Young Parent WRAP program delivers a holistic model of service delivery designed to support and prevent pregnant teens and young mothers who are threatened with homelessness from becoming homelessness. The partners are the Children's Aid Society, Community Adolescent Network, Salvation Army/Grace Haven, Catholic Family Services/ St. Martin's Manor, and the Victorian Order of Nurses.
- The Hamilton Regional Indian Centre and the Social Planning and Research Council of Hamilton have partnered to create a staff position to conduct research on Aboriginal homelessness for this Report Card on homelessness.
- A 15 bed emergency youth shelter that Wesley Urban Ministries and Living Rock Ministries have partnered to create.
- The Hamilton Tenant Education Project provides education, outreach, and ongoing support to create a better informed tenant population and prevent homelessness. The project brings together a range of agencies and is guided by the Solutions for Housing Action Committee.
- The MAC Door is an innovative program designed to empower street involved youth to get off the streets. The partnership is between the McMaster School of Nursing and Wesley Urban Ministries.
- The Health and Nutrition Project at the Living Rock provides essential food and medical supports to at-risk and street-involved youth including a partnership with the Aboriginal Health Centre to fund part of the nurse practitioner's hours and the breakfast program.

3.1.10 Progress in Research

The community has accomplished a great deal of planning and research around issues related to homelessness with the following local reports:

- a survey of over 300 food bank recipients (Hamilton Food Share, forthcoming)
- a needs assessment around an emergency shelter for senior abuse (Hall, 2002)
- the draft McMaster/HEDAC Evaluation (Freeman, forthcoming)
- *Poverty and Homelessness in Hamilton* (Neigh, 2002b)
- *Consulting the Community around Housing and Homelessness - Structured Notes and Themes (Neigh, 2003)*
- *Vacant Rental Market Survey* (Housing Help Centre, 2002)
- *Homelessness in Hamilton, Busting the Myths* (Hafner, 2003)
- *Housing Need among People with Disabilities in Hamilton* (Neigh, 2002a), see Appendix I for executive summary.
- *Trends in Homelessness in Hamilton* (Wingard, 2002)
- *A Community Action Plan on Health and Homelessness* (McMaster School of Nursing, forthcoming), which will include health information derived from interviews with 250 interviews with people in emergency shelters in Hamilton as well as individual chart audits.
- *The Hamilton Aboriginal Youth Stay In School Initiative* (Stevenato, 2003)
- *Youth Barriers Report* (Martin & Trudeau, 2003).

The Community Advisory Board on Homelessness also sponsored several specific pieces of research all available through the City of Hamilton:

- *Emergency Shelter GAPS report (McKibbon, 2001)*
- *What are effective strategies in the prevention of homelessness? (Moncrief, 2001)*
- *Comparison of SCPI cities (Dunn, 2001)*

The Federal government has also completed several pieces of research regarding the SCPI program in Hamilton including:

- *Implementing the Supporting Communities Partnership Initiative through the Community Entity Municipal Model in Hamilton (Graham, Phillips, and Ker, 2003)*
- Several case studies on individual case studies on SCPI funded projects in Hamilton.

There is additional research on the impact of SCPI on homelessness in different communities across Canada which is available on the National Homelessness Initiative website (http://www21.hrdc-drhc.gc.ca).

These planning documents and pieces of research are tools in the community's efforts to address homelessness. As has been noted, the crisis of homelessness is very complex - with any number of factors combining to force someone out of permanent housing and onto the street or into emergency shelter. These documents make a significant contribution to our understanding of homelessness in Hamilton. The Homelessness Evaluation Committee did identify that there remained significant gaps in our knowledge about certain sub-groups of the homeless population.

3.2 Challenges

3.2.1 Growing Demand

The clearest quantitative evidence of the growing demand for services is in McKibbon's (2001) recent analysis of the emergency shelter system in Hamilton. While he admits that estimating the number of people who are homeless in Hamilton is a very difficult task, he suggests that approximately 6,000 people were homeless over the course of the year in 1998. He goes on to suggest that, due to increasing poverty, the number in 2001 likely exceeded 13,000. Current data collection tools in place are not able to count the actual number of different people who have used the emergency shelter system over the course of a year. This is a significant challenge to understanding the crisis of homelessness in Hamilton.

McKibbon's estimates are supported by qualitative evidence gathered from service providers. They reported that the increase in demand is due largely due to increasing poverty and a lack of affordable housing options and does not appear to be limited to any sub-group of the homeless population. Qualitative reports of increasing youth, seniors, Aboriginal people, women, families, recent immigrants, refugees, and men were identified in the consultation with the community (Neigh, 2003). Outreach workers reported that they were seeing increasing numbers of people experiencing or at risk of homelessness.

"Four years ago it was maybe a little unmanageable, but as the years have gone on we have needed more people to do the work because there are more people out there"

"...the status quo is not acceptable. The situation is abhorrent, and should never have been allowed to become the status quo."

Other indicators of the growing demand for emergency shelter are captured in the other sections of this report. Increasing emergency shelter usage, increasing turnaways at some women's shelters, and the growing number of people who are homeless and are waiting for subsidized housing are all indications that the demand for services related to homelessness are growing.

3.2.2 Sustainability, Stability, Adequacy, And Accessibility of Funding

Many agencies and organizations doing work related to homelessness continue to be underfunded. As one example, the *Community Action Plan* on Homelessness recommended that the "per diem" rate emergency shelters for men receive needs to be adjusted to reflect the true cost of providing service. The *Report Card on Homelessness (2002)* found that the per diem rate had been increased from $34.50 to $38 per bed per day. The *Community Action Plan* identified that that this rate was below the true cost of operating adequate services. The true operational cost of providing shelter at one local provider were approximately $48 per bed per day[17]. Women's (Violence Against Women) emergency shelters are funded based on 1996 occupancy rates, and need to be adjusted to current levels.

The *Community Action Plan* also identified that the lack of adequate funding limited the connections with professional support services for some of the clients in emergency shelters with complex needs. The SCPI funding temporarily contributed to increased case managers and increased health care services in emergency shelters and some of those positions will continue past SCPI. However, adequately funding the operations of emergency shelters on an ongoing, permanent basis would enable these enhanced supports to be in place permanently.

Some of the prevention projects and partnerships will be ending and some will be scaling back as a result of the end of SCPI and Urban Aboriginal Strategy-Homelessness funding. A second round of the National Homelessness Initiative funding has been announced, however, the details about funding amount and eligible activities are not known. As this document is being written, the Emergency Loan Program has stopped offering loans temporarily, the Moving and Storage Program has closed, and the Supporting Families in Transition program is unlikely to continue past June 2003. The impact of the gap in funding from the Federal government will certainly impact on the many recipients of these services. In the case of the Housing Emergency Loan Program, the Federal government has indicated that emergency loan programs will not be supported as part of the National Homelessness Initiative. This creates immense pressure on this program to continue the level of service that it was able to achieve with the assistance of SCPI dollars.

[17] Personal communication, Good Shepherd Centre, April 2003.

The progress generated by the three year National Homelessness Initiative in this community demonstrates that, with resources, this community is capable of generating new and innovative projects to better address the crisis of homelessness. The amount of SCPI funding and UAS-H funding should be increased and made permanent in order to better meet the needs of the community. Making funding permanent would allow agencies to engage in long term planning and activities.

Key informant interviews with community leaders in racially visible communities revealed that even though they are performing activities that are related to homelessness, they are not likely to call the problem "homelessness" (see the section: Issues of Access and Equity). One resulting impact is that communities who do not define the work they do as work related to homelessness is that they will not access funding targeted for homelessness. All processes related to homelessness should be inclusive, and should include specific strategies to reach Aboriginal and racially visible communities.

RECOMMENDATION C: The Federal government should increase and make permanent SCPI funding.

RECOMMENDATION D: Provincial and Municipal governments should increase and make permanent funding related to homelessness.

3.2.3 Systemic Barriers to Shelter Use

Most people who are experiencing homelessness do not access emergency shelters. One of the reasons people do not use emergency shelters is because there are systemic barriers that prevent them from accessing services that would help them (for a full discussion of access and equity issues, see Section 3). The *Community Action Plan* recommended that an assessment of systemic barriers at emergency shelters be carried out, however, that work has not been done. Our consultation with people who are at risk of homelessness and key informant interviews with community leaders, front-line and outreach workers showed that there are systemic barriers in place in Hamilton. The following are several examples of the systemic barriers to accessing emergency shelters and drop-ins.

Some seniors reported that they do not feel comfortable in emergency shelters, and gave such reasons as: they are not wheelchair accessible, there are too many stairs, no elevators, too noisy, too much clutter, there are not other seniors around (Hall, 2002). They said they would use emergency shelters made for seniors if they existed. Many seniors, particularly seniors who are recent immigrants, are reluctant to access formal services and miss supports available to remain housed (Jaffray, 2003).

In research conducted for the *Homelessness Trail,* of 43 Aboriginal respondents who identified themselves as experiencing absolute homelessness, 47% use shelters; over 50% do not. Of the 150 respondents who were experiencing absolute or relative homelessness, 31% indicated that they were not comfortable using available services. 70% found existing Aboriginal specific services useful. 44% of respondents indicated a need for culturally specific needs that are not addressed by mainstream service agencies. These findings indicate and support the need for

Aboriginal specific services, promoting culture based activities by Aboriginal organizations in conjunction with mainstream agencies in addressing homelessness *(Homelessness Trail, 2001).*

We were told that there are many families in Hamilton who require emergency shelter and financial assistance to avoid losing their housing, but face considerable barriers to access mainstream services. A key informant interview with the Hamilton Muslim Association identified high needs among Muslim families, especially newcomers to the community, who faced systemic barriers to accessing mainstream services including increased incidences of overt racism since September 11, cultural and language barriers, a lack of knowledge about services, and food that does not meet the dietary restrictions (personal communication, Hamilton Muslim Association). As a result of these barriers, many recent immigrants who are Muslim are unlikely to access mainstream services, and rely on the Muslim communities and Mosque for them. The Mosque does not receive any external funding for the work that it does.

> *"We are talking about thousands of people [in need]. Every week we are topping up people's rent and preventing evictions. We have families staying at the Mosque for shelter. We coordinate housing for people within the [Muslim] community" - key informant interview, Hamilton Mosque*

Having religious groups provide direct services to their communities has the benefit of relieving an overburdened system but also further isolates communities who have great need but do not have access to adequate resources to address the issues of poverty and homelessness.

There remains no settlement house for recent immigrants or refugees arriving in Hamilton that would provide a variety of culturally specific supports to newcomers (see transitional housing). The Supporting Families in Transition program offers short-term accommodation in hotels, but is only funded until the end of SCPI. Some immigrant groups that are less recent also reported members would not rely on emergency services even if they needed them due to language barriers, lack of knowledge of locations, and a distrust of government and the "system" (key informant interview, see Appendix B). The need for a Settlement House is discussed under transitional housing.

Some people with addictions do not meet the criteria of several of the emergency shelters. As an outreach worker stated, *"more and more people are at risk on the streets, people with serious health problems because of substance use, and they can't get a place to sleep because the shelters won't take them when they are under the influence" (*in Neigh, 2003*).* Community agencies have identified the need for a harm reduction shelter - in order to reduce the health risks of people who are not allowed into the shelter system.

***RECOMMENDATION E:** The Community Action Plan recommendation regarding a systemic barriers needs assessment regarding emergency shelters and drop-ins should be implemented to identify people who are experiencing absolute homelessness, but are not accessing emergency shelters. This needs assessment should include people who have experienced barriers, experts in access and equity, and service providers.*

3.2.4 Limited Space in Shelters

As an outreach worker noted: "*getting females into shelters is almost impossible. This is an ongoing problem. They are looking into moving people to other cities to find a shelter bed, but that is a big problem, 'not an option' because it further isolates a woman experiencing what is already a tremendous crisis" (in Neigh, 2003).* One of the objectives of the SCPI program was to increase the amount of space available in emergency shelters so that everyone requiring a space would have one (Addendum to the *Community Action Plan, City of Hamilton, 2001*). Research gathered for this Report indicates that shelters for women and shelters for youth had to turn people away because they were full on the nights of our survey *(SPRC Emergency Shelter Use Survey, 2002*). In addition, the temporary family shelter, which added 10 units, has been at capacity since it began operation in September 2002 *(project file notes, City of Hamilton).*

3.2.5 Challenges in Health Care

There is a lack of available and accessible health care for people who are at risk of, or experiencing homelessness. In spite of the gains noted above related to health care, qualitative evidence gathered suggests that many people at risk of homelessness are still having difficulty accessing the health care they need. These difficulties include the *amount* of primary health care available:

"Hard to find adequate health care, including both family doctor and dental..."

"Even at good clinics, sometimes it is really busy so it can be hard to get in to see a doctor or a nurse..."

*"Emergency rooms are awful, the wait is too long" (*all quotes in Neigh, 2003*).*

Access to health care is also constrained by limited service hours and limited resources to address the range of health solutions needed. The coordination and connection of health care service and delivery for people who are experiencing homelessness also limits effective health care. Many people who are homeless access different health care services (an emergency room, a walk-in clinic, a nurse practitioner at an emergency shelter) and the continuity of treatment and care is difficult when those services are not coordinated.

RECOMMENDATION F: There needs to be increased resources to facilitate access to health care and health programs for people experiencing homelessness as well as facilitating improvement of the coordination and delivery of those programs.

There is also a lack of recognition of the interplay between homelessness, poverty and health. People who are homeless are at higher risk for infectious disease, premature death, and chronic health problems than the general population. Being homeless can also make existing medical conditions worse. For example, a man who is homeless and diabetic, will have a very difficult time obtaining food and insulin to meet his specific nutritional and treatment requirements if he has to rely on meal programs and food banks and has very little income.

These factors can combine and will likely result in worsening diabetes and increased health risks. Being homeless also has serious effects on social, mental, and emotional health. As discussed in Section 2.2, people experiencing, or at risk of homelessness, reported mental stress, depression, alienation, and hopelessness. These factors all have consequences for a person's sense of health and well-being.

There are also overlapping effects of health, mental health and addictions particularly for people who are experiencing homelessness. Some people who are experiencing chronic physical pain, depression, or other mental or emotional illness, will turn to self-medication to relieve symptoms. People who are homeless will have less access to treatments for these illnesses and will be more likely to rely on self medication. Consistent self-medication with drugs or alcohol can lead to issues with addiction that can de-stabilize a person's situation further.

RECOMMENDATION 6: There is a need for increased research on inner city health issues and the social determinants of health, particularly related to homelessness in Hamilton. This research should have a focus on specific methods to help people who are experiencing absolute homelessness move into stable housing.

3.2.6 Closure of Two Support Services

Another challenge facing this community is the closure of VHA Health and Home Support Services in the Spring 2002. VHA provided seniors with home care support in order that they could live independently. With the loss of this service and the reductions of service by Community Care Access Centre, many seniors' ability to live independently will be at risk (Neigh 2002a).

The closure of the Moreland Addictions Treatment Centre, the only in-patient addictions treatment centre in Hamilton, will also impact on the community response to homelessness. People with addictions are at higher risk of homelessness (Mayor's Action Task Force on Homelessness, 1999). For many people who are homeless and who are struggling with addictions and are ready to give up drugs or alcohol, in-patient treatment can be an important step on the road to maintaining permanent housing. The lack of any such facility, coupled with the lack of any harm-reduction or "wet" shelter, represents major service gaps for people with addictions who are homeless.

3.3 Summary

There has been a significant impact of SCPI funding on progress related to the supply of emergency shelter, support services, prevention programs, and community planning and research in Hamilton. The challenges of increasing demand, systemic barriers to accessing services, and limited spaces in emergency shelters present challenges to long-term progress addressing homelessness. The lack of sustainable, stable, adequate funding for services, and the closure of two important services in our community speak to the volatile funding environment, which limits long term success addressing homelessness. The SCPI funding has strengthened services for people experiencing homelessness, and should be increased and made permanent.

SCPI is one vital piece of addressing homelessness, but the effort to reduce and end homelessness must be accompanied by significant policy initiatives to address poverty, create affordable housing, provide adequate supports for people to maintain housing, and reduce discrimination.

4.0 ISSUES OF ACCESS AND EQUITY

"Any discussion of a social problem as complex as homelessness would not be complete without an analysis of how race, gender, class, sexual orientation, age, and disability impact on a person's likelihood of becoming homeless, and that person's ability to access services that would resolve their homeless situation." - Community Action Plan on Homelessness in Hamilton.

The *Community Action Plan*'s chapter on "Systemic Issues" identified that differences in power and privilege are closely related to experiences of homelessness. (see Appendix A, "Assumptions and Guiding Principles"; consult the Glossary for definitions). This chapter examines the impacts that racism, sexism, heterosexism/homophobia and ableism have on certain people's *access* to housing, income, and services related to homelessness. It also examines the implications of these oppressions in terms of ensuring *equity* for all groups in the community.

It is important to emphasize the systemic nature of racism, sexism, and other oppressions. Every person in an organization may oppose blatant, individual acts of racism, but policies, procedures, and organizational culture may create barriers that exclude and oppress certain disadvantaged groups as employees or volunteers or clients. Identifying these kinds of barriers should be looked at as a reason for action and improvement, not defensiveness and denial.

4.1 Findings Related to Racism

Hamilton has 52,705 residents that are racially visible people as reported by Statistics Canada. As the sections on poverty and housing explain in more detail, racially visible people in Hamilton experience disproportionate amounts of poverty (41% vs. 21.9% in 1996 in Hamilton-Wentworth), and they also have a higher likelihood of being denied housing because of discrimination by landlords. These factors result in an increased risk of homelessness. Additionally, systemic barriers limit access to services that could help prevent or alleviate homelessness. Systemic barriers can include outreach processes that neglect racially visible communities, a lack of anti-racism policies and procedures, inadequate grievance procedures or services that do not reflect the diversity of the community.

Table 2: Racially Visible People Living in Hamilton[18]

Community	Number of Hamiltonians	Percentage of Population
All racially visible people	52,705	10.9%
African Canadian	10,455	2.2%
East Asian Canadian	9,715	2.0%
Latino/a Canadian	4,250	0.9%
South Asian Canadian	11,000	2.3%
Southeast Asian Canadian	8,800	1.8%
West Asian Canadian	5,765	1.2%
Other non-Aboriginal racially visible Canadians	2,625	0.5%

Source: Statistics Canada, Census 2001.

Given that the majority of newcomers to Canada in the last couple of decades have been racially visible people, the issues of race, language, and migration will be considered together. Even though this Report talks about these barriers together because they overlap, the intricacies must be address individually.

4.1.1 Challenges in Addressing Systemic Racism in Organizations[19]

Our main sources of information about racism and organizations whose mandates relate to homelessness and poverty are the organizational survey (81 groups and organizations who do work related to homelessness, broadly defined) (Appendix D), key informant interviews with racially visible community leaders and frontline workers, and the *Consultation with the Community* (Neigh, 2003). From the key informants, we identified that need for services related to homelessness and poverty is high, and yet many racially visible Hamiltonians do not access mainstream services to meet these needs. The experiences related to us by racially visible people included a lack of knowledge about services, language barriers, and direct acts of racism. These individual experiences point to systemic barriers: inadequate outreach strategies, inadequate availability of cultural interpretation, and inadequate training and grievance procedures. This is consistent with our findings around a lack of adequate anti-racism policies and procedures, and lack of implementation of those policies in many groups and organizations related to homelessness and poverty. Individuals related the presence of barriers in the context of food banks, emergency shelters, education, health care, and other community-based services that are important to people who are experiencing or at risk of homelessness (Neigh, 2003). Barriers to accessing organizations that provide services that may prevent or address homelessness, and the various factors that lead to it, represent a serious problem in Hamilton's response to the homelessness crisis.

[18] Please note that these numbers do not include Hamilton's Aboriginal Community, which is described in Section 7.

[19] Our findings around racism and housing and racism and poverty are included in the housing and poverty sections.

Key informants suggested that the lack of widespread knowledge is linked to services having been found to be inaccessible and/or not valuable by those who had tried to use them. The lack of knowledge is also connected to the fact that many service providers do not actively promote information about their services in order to reach some racially visible communities (see below). Members of some communities do not access mainstream homelessness and poverty-related services at all.

Lack of cultural interpretation can make services meant to address homelessness and poverty completely inaccessible to newcomers to Canada, the majority of whom are racially visible people. Over the last year, 3,360 recent immigrants and refugees arrived in Hamilton, with 961 being refugee claimants with little access to income supports. Almost 120,000 people in Hamilton people have a first language that is neither English nor French *(Statistics Canada, 2003)*. Approximately 120 languages are spoken, 85 by recent immigrants who speak neither French nor English *(Working Group on Racial Equity, 2001)*. In addition to offering cultural interpretation, it must also be promoted so people know it exists.

- 48% of responding organizations do not regularly arrange and pay for cultural interpretation.
- 34% of responding groups and organizations clearly advertise and promote the availability of cultural interpretation at their organization.
- 64% of responding groups and organizations do not make their written materials available in any languages other than English or French.

Deliberate action including policy development and implementation and the availability of cultural interpretation to reduce barriers and will ensure that the supports they provide are available on an equitable basis to all members of the community who are experiencing or at risk of homelessness.

In terms of policies, 65% (48 of 74) of the responding groups and organizations connected to homelessness and poverty answered that they did have an anti-racism, anti-discrimination, or anti-harassment policy in effect. This suggests that at least a third of the organizations in question lack such a policy, and this may be an underestimate[20].

The range of policies described in the request—anti-racism, anti-discrimination, and anti-harassment—can cover a broad variety of things, from the individual level to the systemic. Of those respondents who provided a copy of their policy, 80% dealt only with the level of individual experiences of discrimination or harassment. The other 20% made some reference to systemic issues. Approximately half of respondents gave no response in terms of how anti-racism was being implemented in their organization. Of those who provided a response around implementation:

[20] We requested a written copy of the policy as well. In response to this request, 23% of those who identified as having a policy did not, in fact, have a formal written policy at all or their policy consisted of two or three sentences affirming a general opposition to racism, harassment, or discrimination, with no content beyond the declaration.

- 28% quoted the existence of policies as evidence of action, but did not describe actions to implement the policies
- 20% could point towards no actual implementation, but some of these said they were developing policies.

The remainder of the groups and organizations identified the following actions around implementation:

- anti-racism training (25%)
- changes in board or volunteer recruitment (5%)
- changes to hiring processes (10%)
- reviewing existing policy and/or materials (15%)
- 5% of the organizations that responded around issues of implementation referred to some kind of systematic process for organizational change.

The most common response around implementation of anti-racism activities within groups and organizations related to homelessness and poverty was trainings (25%). In the survey, respondents were also asked to estimate the percentage of employees that have received training:

Table 3: Anti-Racism Training

Percentage of members in group or organization who have completed anti-racism training	Percentage of responding groups or organizations in each range.
< 5%	27.3%
5-25%	13.6%
26-50%	10.6%
51-75%	12.1%
75-95%	15.2%
95-100%	21.2%
	100.00%

Source: SPRC Homelessness Survey, see Appendix D

As the above table demonstrates, only 21% of respondents have had almost all members or staff complete anti-racism training, and 27% have had essentially none.

In order to ensure that groups and organizations are accessible to everyone who is at risk of, or experiencing homelessness, policy development, cultural sensitivity, and anti racism training needs to be emphasized. Resources from funders, all levels of government, and from within groups and organizations must be made available to facilitate these organizational changes.

RECOMMENDATION H: All groups and organizations with mandates connected to homelessness and/or poverty, which provide services to the whole community should develop systemic anti-racism and anti-oppression organizational development initiatives including policies, implementation plans, practices, training and strategies for cultural interpretation. This should be done in consultation with experts in access and equity, and members of

racially visible communities. These initiatives should be tied to outcomes in both individual performance and organizational performance.

An important way to prevent barriers to services related to homelessness and poverty is to facilitate extensive participation in the design of new programs and services by racially visible communities themselves. According to the organizational survey, 51% of respondents currently involve racially visible communities in the planning and design of new programs. Involving racially visible communities in such design and planning can be an effective way of ensuring that services related to homelessness and poverty are not implemented in a way that excludes some members of those communities.

RECOMMENDATION I: All new programs and services in Hamilton should be developed in a way that involves racially visible community participation.

4.1.2 Other Findings Related To Racism

Seventy-nine percent of surveyed groups and organizations related to homelessness and poverty did not have data confirming that their staff reflect the racial diversity of the community. This suggests that most organizations either have data confirming they are not reflective or have not assed the situation. Any effort to address barriers to employment of racially visible people can only start from knowing whether there is a problem of under-representation to address.

Previous attempts of funders to require anti-racism initiatives to address systemic barriers met with some resistance in the Hamilton community. When the United Way began to encourage anti-racism organizational development initiatives amongst the organizations it funds in the late 1990s, a series of articles appeared in the *Hamilton Spectator* detailing some agencies' anger at this policy requirement *(Working Group on Racial Equity, 2000:188)*.

Thirteen percent of groups or organizations who identified taking specific activities to reduce barriers or encourage participation by recent immigrants, refugees, or racially visible people cited maintaining a relationship with SISO as the only activity. Maintaining a relationship with an organization does not reduce barriers within an organization, and SISO is not mandated to reduce barriers or encourage participation in other organizations.

4.1.3 The Implications for Funders

> *"It is important that both personal and systemic discrimination be addressed by service providers and program funders" - Community Action Plan on Homelessness.*

While service providers and groups doing work connected to homelessness and poverty should conduct organizational reviews and reduce barriers at an organizational level, there are opportunities for funders to play an important role as well. One tool that is available to funders is a requirement to implement various equity-related changes, such as hiring procedures, board development and internal anti-oppression organizational development processes.

RECOMMENDATION J: Both governmental and non-governmental funders who fund work related to homelessness, poverty, and housing in the City of Hamilton should require anti-racism and anti-oppression organizational development initiatives for homelessness-related organizations serving all people.

Another tool that funders have is to address access and equity issues through increased funding to community-specific responses to homelessness. Though it is still inadequate to the need, the only racially visible community in Hamilton to receive community-specific funding around homelessness is the Aboriginal community. This has facilitated significant community mobilization and progress towards addressing needs (see section on Aboriginal Issues). Community-specific organizations (both secular and faith-based) in other racially visible communities try to address absolute homelessness and extreme poverty that are not being met by mainstream organizations, yet few of them are funded[21], and their efforts would be much more effective with adequate funding. (See Recommendation X on page 78)

One important barrier to note in this regard is that many such organizations do not identify "homelessness" as being something that they deal with, or something that they see in their communities. This is a difference in how homelessness is defined. In the key informant interviews where such an assertion was made, the description of the activities of the organization and the issues faced by the community made it clear that homelessness, as broadly understood by the SPRC, is a critical problem in all of these communities (see Appendix A).

RECOMMENDATION K: Funding related to homelessness and poverty should use an inclusive process to create access to funding which is equitable for Aboriginal, racially visible communities, and other marginalized groups.

Because organizational change related to anti-racism is a long-term process and requires expertise, there is a need for a local organization to serve as a resource for facilitating this kind of change in organizations and communities. The Strengthening Hamilton's Community Initiative could be a partner in bringing about this kind of organization.

RECOMMENDATION L: Stable, core funding should be provided for a new, independent organization grounded in racially visible communities, staffed by people with experience of anti-racism change work, and devoted not to service provision itself, but to be a resource for facilitating systemic anti-racism and anti-oppression change and community level advocacy, in the context of groups and organizations related to homelessness and poverty. Possible funding sources and an implementation plan could be explored in partnership with Strengthening Hamilton's Community Initiative.

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[21] The section on Services describes some examples of organizations providing emergency shelter and income, but not receiving funding.

4.2 Findings Related to Sexism[22]

Recent research in Hamilton indicates that more women than men are homeless - but women are more likely to be part of the "hidden homeless" *(Hafner, 2003)*. Additional data from the Community Housing and Access Network also provided evidence that households headed by women represented the majority of households with homeless status (personal communication, CHAN).

A major cause of homelessness for women is violence against women. The following table is based on 117 applications over a 6-month period in 2002, and shows where survivors of violence were staying when they applied for subsidized housing.

Table 4: Summary of Special Priority Applicants - CHAN

Location when applying	Number	Percentage
In their home	51	43%
In a shelter	47	40%
With family or friends	10	9%
Transitional housing	8	7%
In a motel	1	1%
Total	117	100%

Community Housing Access Network, 2003 Author's Calculations

The majority of women remain in their home or with family and friends while waiting for subsidized housing - and without safeguards against future incidents of violence. As the section on poverty makes clear, women, particularly racially visible women, disproportionately experience poverty. As well, single parent families with children, particularly those headed by women, are more likely to experience poverty. Landlord discrimination is very commonly experienced by single women with children, particularly those on social assistance *(Mayor's Action Task Force, 1999; Centre for Equality Rights in Accommodation; 1998)*.

4.3 Findings Related to Heterosexism/Homophobia

In our community consultation, all people who identified as lesbian, gay, or bisexual reported incidences of discrimination in the context of service provision or housing. People reported landlord discrimination, and the experience of violence because of sexual orientation. They stated workers in some services discourage expressions of non-straight sexual identity by clients. This is in contradiction to 97% of organizational survey respondents that stated they allow a flexible definition of family amongst participants/clients, including same-sex partnership. The findings are based on relatively few informants, so should be treated as preliminary.

RECOMMENDATION M: Further research needs to be funded and done in the Hamilton community around the experiences of lesbian, gay, bisexual, and transgender people in terms of access to income, housing, and services related to homelessness and poverty.

[22] Many issues related to women's homelessness are discussed the Services, Housing, Poverty, and Aboriginal sections of this Report.

RECOMMENDATION N: All organizations whose activities are related to homelessness and poverty should develop systematic plans for making their activities/services accessible to people who identify as lesbian, gay, bisexual, or transgender.

4.4 Findings Related to Ableism

There is an inadequate supply of housing that is affordable and physically accessible for people with disabilities in the Hamilton community *(Neigh, 2002a)*. People with disabilities are forced to rely on income support systems that are inadequate, which contributes to their disproportionate experience of poverty. Out-of-pocket costs associated with health and support services are a drain on the limited funds available to many people with disabilities, and can provide a barrier to services. This also makes affording housing more difficult. Cuts to health and support services are reducing the options for people with disabilities to live independently in the community, and in particular reductions in homemaking supports are having a negative impact. (See Appendix I for conclusions and recommendations of this study).

The organizational survey found that 67% of responding homelessness-related groups and organizations report being fully accessible to an employee, volunteer, participant, or client in a wheelchair. 33% of groups and organizations are not fully accessible.

The Housing Help Centre received funding through SCPI, and has renovated its space, in order to enhance its accessibility. Other organizations reported activities and renovations to reduce physical barriers as well.

The Supported Housing Coordination Network has been very active in planning around the needs of people with severe and persistent mental illness. Their work is most recently reflected in the report *Housing and Support Requirements for People with Severe and Persistent Mental Illness* (HDHC, 2001). The recommendations from those reports should be implemented.

5.0 ECONOMY/INCOME

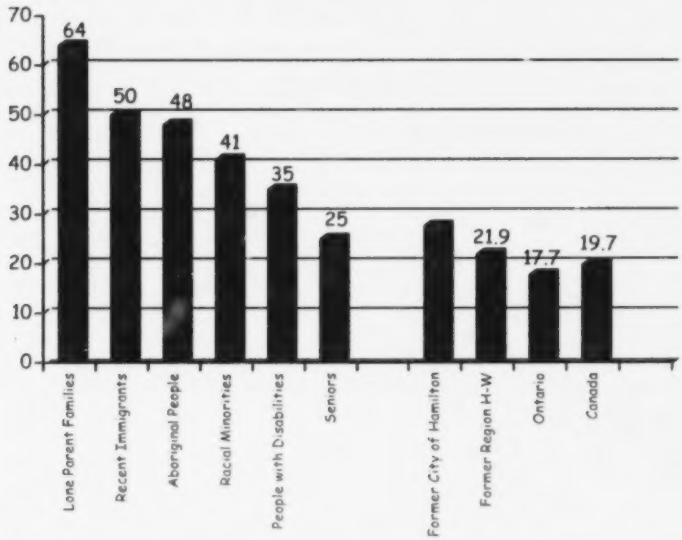
Of all the issues that impact on a person's likelihood of becoming homeless, poverty is the most prevalent and relentless...At some point, it does not matter how affordable housing is, if your income is too low, it will still be unaffordable... - The Community Action Plan on Homelessness in Hamilton.

One of the largest risk factors and causes for homelessness is poverty *(Hulchanski, 1997; Mayor's Homelessness Action Task Force, 1999; Shapcott, 2003.)* People who are poor are forced to make impossible choices about how to spend too little money and risk late rent payments, arrears, and eviction. Moreover, poverty is not distributed evenly in our community. Single mothers, Aboriginal people, racially visible people, recent immigrants, refugees, people with mental and physical disabilities, and seniors all have higher poverty rates than the overall rate for this community. Reducing poverty was identified as a priority recommendation in the *Community Action Plan.* The *Report Card on Homelessness (2002)* found that progress had not been made addressing poverty.

5.1 Who Is Affected By Poverty?

Poverty does not affect everyone in our community in the same way. Some groups in our community experience much higher rates of poverty than do others. The following chart, used in the *2002 Report Card on Homelessness*, demonstrates some of the ways that poverty is distributed amongst different groups in the community.

Chart 6: Poverty Rates (% below LICO, 1996)



Source: Report Card on Homelessness 2002. (1996 census data)

This 1996 data shows clearly the differences in where poverty is experienced in our community. Single parent families, recent immigrants, Aboriginal people, racially visible people, people with physical or mental disabilities, and seniors have significantly higher rates of poverty than the general population. Of single parent families, 85% are headed by women. Recent information compiled by the SPRC from Statistics Canada showed that gender continues to relate to the experience of poverty in Hamilton (Neigh, 2002a). Single earner families who are headed by women can expect to earn roughly one-half of those headed by a man. This experience is not limited to Hamilton - national data recently released by Status of Women Canada indicated that women earn 72 cents to every $1 earned by a man for full time work. (The number was 64 cents to every $1 when part-time work was taken into account).

The poverty rate amongst racially visible people in the City in 1996 was 41%, compared to 22% for the population as a whole (Feightner, Wong, and Kowalski, 1999). More recent work done by the SPRC has found a striking positive correlation between the proportion of racially visible people living in an area of the city, and the proportion of people living in poverty in those areas (Neigh, 2002a). This confirms extensive work done nationally and in Toronto, which has shown that racially visible people disproportionately experience poverty and that systemic racism is a significant part of the explanation (Kunz, Milan, and Schetagne, 2000; Ornstein, 2000; Galabuzi, 2001). In particular, racially visible women face the combined experience of racism and sexism, which further increases barriers to equitable participation in and benefit from the economy (Galabuzi 2001).

5.1.1 Aboriginal Poverty

As shown above, poverty rates among Aboriginal people in Hamilton are disproportionately high. Almost half of all Aboriginal people living in Hamilton live below the poverty line (48%). Child poverty among the Aboriginal community in Hamilton is even greater at 58.6%. This is more than double the rate of child poverty in the total population (27.3%). In the former city of Hamilton the poverty rate among First Nations women is 57%[23].

In the consultations with the Aboriginal community, there were recurring themes of a lack of money and poverty.

"Many people I know, because of their finances or because they are Native, are vulnerable and live in squalor. A woman I know lives in an apartment building that should be condemned. She is basically starving and she is dirty all the time. She can't afford soap, and the water in her apartment doesn't run properly". (in Neigh, 2003),

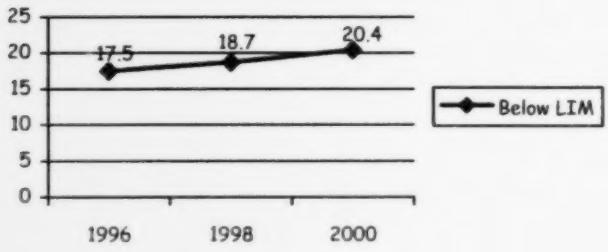
Many young people go without things or activities because of the poverty: *"[No] school pictures (one young man said he's never had a school picture), pizza days, school trips, year books, new school clothes,...bus passes/tickets...sports (can't pay for uniform costs),...clubs (can't join, usually money involved),...lunch/food (especially near end of month) etc.,.(Neigh, 2003).*

[23] These statistics come from 1996 Census data from Statistics Canada. They were computed using the Beyond 2020 Database.

5.2 Poverty Is Increasing In Hamilton

While the previous section demonstrates that poverty is experienced differently in the community, the overall trend presented below is that the number of people with low incomes is increasing[24]. Recent statistics on poverty as well as increased food bank use indicate that more Hamiltonians have inadequate incomes. The following graph uses statistics from tax filer data produced by Statistics Canada, and uses the Low Income Measure (LIM) rather than the more traditional measure of poverty, the Low Income Cut Off (LICO). The LIM underestimates the amount of poverty because it does not take into account that it is more expensive to live in larger centres. For example, in Hamilton in 1996, there were 17.5% of households below the LIM, whereas 21.9% were below the LICO.

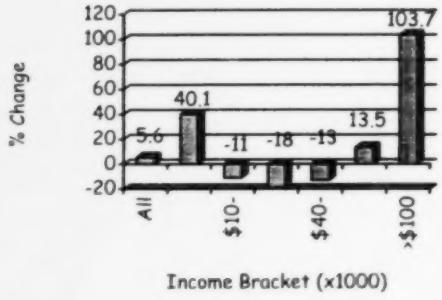
Chart 7: Percentage of Households Below LIM in Hamilton-Wentworth, 1996-2000



Source: Taxfiler data from Statistics Canada

Chart 7 shows the number of households below the Low Income Measure for the years 1996 to 2000, which increased from 35,550 (17.5%) households to 42,470 (20.4%) households - an increase of 20% in the absolute number of people with low incomes.

Chart 8: % Change in Number of Hamilton Families in Specified Income Brackets, 1994-2000



Source: Neigh, 2002a

5.2.1 Income Inequality Is Also Increasing

Chart 8 shows there was a 40% increase (from 5110 to 7160) in families reporting earnings less than $10,000 between 1994 and 2000. Over the same time period, there was a 103% increase (from 10,930 to 22,260) in the number of families with incomes over $100,000. The overall number of families increased by 5.6% (127,760 to 134,880.) Income inequality is considered by some to be the source of homelessness (O'Flaherty 1996).

[24] For a full explanation of these findings, please see Neigh (2002a).

People living in poverty often must resort to food banks and meal programs to have enough to eat. As food banks have usage restrictions (number of visits) they are not an indication of daily hunger but an overall increasing need in our community. The 6,072 households who were helped in March 2002 represents 14,662 total people - 43% of whom are children *(Foodshare, 2002)*. Meal programs are accessed on a more regular basis and can expose the ongoing level of hunger. In the month of March 2002, there were 48,500 meals served at programs in Hamilton. Food bank data shows that usage rose by 15% in 2002 *(Foodshare, 2002)*. Meal programs have risen since 1999 as need has risen. The modest reduction between 2001 and 2002 is due to a reduction of 7,000 snacks served in programs rather than a decrease in need *(Foodshare, 2002)*. Charts 9 and 10 show food bank and meal program data over the last four years.

Chart 9: Number of Households Accessing Foodbanks in March

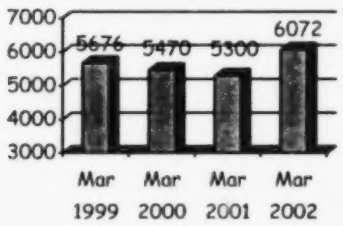
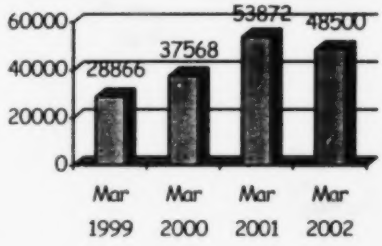


Chart 10: Number of Meals/Snacks Served in March, by Year



Source: Hunger Count, 2001, 2002

A recent survey of over 300 food bank users found that 81% of parents go without food, often or sometimes, so their children can eat. The survey also found that more than 1/3 of children in families who access food banks do not have enough to eat at some time in the month. Over 60% of food bank users said they would be at risk of losing their home without food banks. Social assistance was the most common source of income for people who were accessing food banks - continued evidence that benefit levels on social assistance are inadequate for people to meet their basic needs.

5.3 Progress

5.3.1 Advocacy groups

The community has been active in advocating for poverty reduction and income security. In addition to the ongoing efforts of individuals, groups, and local organizations, several new initiatives also have occurred. The Homelessness Initiative Campaign for Adequate Welfare will be releasing a report detailing the inadequacy of social assistance rates. The report is based on a series of focus groups held with people trying to make ends meet on social assistance. The Income Security Working Group has formed to address a broad range of poverty issues. The group does public education and policy advocacy around poverty related issues.

5.3.2 Programs To Facilitate Employment

There are also some innovative programs being developed, with the help of SCPI funding, to reduce barriers and encourage participation in the labour market. One example is the Tri-Rock program, which provides street-involved or homeless youth with the supports and placement opportunities they need to gain stable employment. There are additional employment programs for people who are experiencing, or are at-risk of homelessness, such as the Education and Employment Program at the Wesley Centre Drop-In and the Steps program at Mission Services, both funded through HRDC.

5.3.3 Establishing Food Security

The community has also been active to come up with creative solutions for people who are hungry in Hamilton. Community health centres are organizing collective gardens and collective kitchens. Information about available meal programs schedule is better coordinated. The Emergency Food Action Group has formed to work on food security issues in Hamilton. Their work includes public education, strategies to better coordinate services at a community level, and bringing together front - line workers to gather information. Coordination between food banks at the Provincial level will increase the amount of food that can be delivered and stored. In Hamilton, funds for a new SCPI supported storage facility and innovative delivery methods will expand the ability of food banks to provide basic essentials to more people.

5.3.4 Emergency Assistance Program at the Native Women's Centre

Through funding from SCPI, the Native Women's Centre was able to enhance its Community Care Packages Program, which offered three specific services to reduce the impacts of deep poverty in Hamilton. Over 2,000 emergency transportation subsidies were disbursed to women and their children, and the working poor, which have enabled people to maintain jobs and permanent housing. Over 1,000 emergency vouchers for food, clothing, medication, and personal items were distributed, as well as approximately 25 educational enhancement subsidies to reduce barriers to full participation in schools.

5.4 Challenges

5.4.1 Inadequate Minimum Wage

The ability of employers to pay less than a living wage[25] in many sectors of our economy is a challenge to addressing poverty. Canada has a higher proportion of low wage jobs than any advanced industrialized country except the United States *(Jackson 2003)*. People who work at the bottom of the wage scale have difficulty making ends meet. As shown in Table 5, the minimum wage will not adequately cover costs for housing. Women, and in particular, racially visible women are over-represented in these minimum wage jobs. As *Wanda Wiegers (2002)*

[25] There are many ways to define a living wage. One useful way to understand it is as anything above what the Organization for Economic Co-operation and Development (OECD) defines as low wages. In Canada, that amounts to about $10 an hour. (Jackson 2003)

notes: "Women, especially visible minority and Aboriginal women, remain concentrated at the bottom of the job hierarchy with jobs characterized by low wages, few benefits, little job security or prospects for promotion, and increased non-standard work" (in Neigh, 2002a). In our consultation with the community, we heard many stories of the difficulties of trying to make ends meet on minimum wage.

"A lot of the people I work with at [local donut store] are single moms who have trouble feeding their kids. This store used to let us take home food that they were going to throw away; I used to take bagels home so that I could feed my kids. At [the store] we're not allowed to take food home anymore" (in Neigh, 2003).

5.4.2 The Barrier of Being Homeless

For people that are already homeless, the barrier to finding adequately paid employment is the absence of a permanent place to live. As one young man said, "*It's a vicious circle. You can't get a job without an apartment, and you can't get an apartment without a job*" (in Neigh, 2003). There is also a stigma attached to being homeless. One man who took part in the community consultation relayed that "*he was actually hired for a job, and then his boss asked him where he was staying, he told him [he was staying in a shelter], who then fired him*" (in Neigh, 2003).

5.4.3 Barriers for Foreign Trained Workers

Foreign trained workers face additional barriers to finding adequately paid work. Requirements around "Canadian" experience and the barriers around recognizing qualifications obtained in other countries puts them at risk of homelessness. The processes of credential assessment, accreditation, and or licensing may take several years. Newcomers must also go through a process of adjustment to a new country and settlement process. This process includes experiencing and overcoming culture shock, learning the language, and familiarizing with Canadian systems. In addition, there are many factors that influence the process of settlement including age upon arrival, gender, dynamics within a particular cultural group, the person's ethnicity, and one's life experiences *(personal communication City of Hamilton, April 2003)*. Key themes around barriers to employment that turned up in our community consultation (Neigh, 2003) were:

- Lack of recognition of foreign experience and qualifications.
- Lack of support in learning English.
- Individual discrimination by employers.

- *The biggest hassle is "getting Canadian work experience, because no one wants to hire you if you don't have it, but how can you get it if no one wants to hire you?"*
- *"It's important to find work, because [I'm] responsible for my family. Language is a big barrier to getting a job. There aren't any programs for newcomers, apprentice programs - could study or update education if there were government programs".*
- *"Maybe none of us [a focus group of recent immigrants] has experienced homelessness, but we are all at risk of homelessness if we don't get jobs"* (all quotes from Neigh, 2003).

RECOMMENDATION O: All levels of government, licensing bodies, employers and community organizations should identify and eliminate the barriers that exist related to foreign licensing and requirements for "Canadian" experience.

5.4.4 The Barrier of Racism

Without access to the income from an adequately paying job, people are at risk of homelessness. Racially visible Canadians tend to be more educated than white Canadians, but are over represented in low paying and less secure jobs. This can be related to systemic racism in the education system, bias in hiring practices and workplace policies and environments that tolerate subtle racism and do not have ways to address these issues. A report by the Canadian Council on Social Development for the Canadian Race Relations Foundation studied the persistence of systemic racism in employment, and concluded:

> *An important obstacle to equity is the difficulty in eradicating the many forms of discrimination that are hard to quantify, especially at the systemic and personal levels. In this case, racial discrimination in the workplace is becoming more subtle—often described as a 'hidden thing'. For example, some visible minority employees saw their managers using subjective factors such as 'accent' to exclude them from access to jobs. In other cases, minorities are shut out of the 'inner circle' that is crucial for their career advancement. Visible minorities and Aboriginal people continue to be treated as strangers in the workplace, reflecting the reality that racialized groups face barriers to socio-economic equality in this country. (Kunz, Milan, and Schetagne, 2000)*

Since the World Trade Centre tragedy on September 11, 2001, many members of Hamilton's South and West Asian communities, particularly those who are Muslim, have experienced increased difficulty in finding and retaining employment due to discrimination. (key informant interview, Hamilton Mosque).

5.4.5 Inadequate Social Assistance Rates

Social assistance can be a mechanism to reduce poverty. In Ontario, social assistance is Ontario Works (OW) or Ontario Disability Support Program (ODSP). OW is delivered by the municipality, but benefit rates and most of the processes and rules for delivery are set by the Province of Ontario. In 1995, benefits for Ontario Works were reduced by 21.6% and ODSP levels were frozen (not adjusted for cost of living increases).

People told us many stories about the impossibility of making ends meet on social assistance[26]:

- *"You can't afford to live on social assistance. The government justifies the low levels of social assistance by saying that people can use food banks"*
- *"Raise the welfare rates up to reasonable levels and you won't be seeing all these homeless people"* (in Neigh, 2003)

[26] For more information on this topic, see the forthcoming report by the Campaign for Adequate Welfare.

These stories are reflected in the following table, which juxtaposes basic costs for food and rents with the maximum benefits available. The amount left at the end of the month (or *not* left as the case may be) illustrates why households on Ontario Works can quickly fall behind on rent or have to access foodbanks to supplement their limited incomes.

Table 5: Total Income, OW and Minimum Wage, Rent Costs, Food Costs, and the Amount Left for Other Necessities, 2002

Family Type	OW Basic Benefit	Total Income (including tax benefits)[27]	Cost of Nutritious Food Basket per Month	Average Monthly Rents	Amount Left per Month for Other Necessities
Single Male - OW	520	572	185	$448 (bach)	-$61
Single Mother with 7 year old daughter - OW	957	1167	229	$744 (2 BR)	$193
Family of four, male and female with boy, 12, and girl 7 - OW	1174	1551	509	$933 (3 BR)	$108
Above Family of four, living on one full-time minimum wage income	1187	1614	509	$933 (3 BR)	$172

Source: City of Hamilton, Social and Public Health Services 2002. Nutritious Food Basket 2002.

The amount left at the end of the month has to cover transportation costs, clothing, toiletries, any costs associated with school, other household expenses like a phone bill, cable TV, internet access among other costs. Social assistance is capable of being one of the most effective tools to relieve poverty and avert homelessness. However, this research indicates that the tool as presently delivered is putting households at risk of homelessness by paying benefits that are not sufficient to meet basic needs. The statistic presented above for minimum wage does not take into account that many people who are working in minimum wage jobs often do not receive benefits like drug or dental coverage which can quickly eat up any money left at the end of the month.

5.4.6 Decreasing Access to Benefits

Between 1994 and 2000, there was a 30% reduction, or 11,600, in the number of households who receive welfare benefits in spite of the rising poverty documented above. The welfare caseload has continued to fall since 2000, and there are currently 10,830 households on the Ontario Works caseload, the majority of whom are single mothers (City of Hamilton, 2002). Moscovitz (1997) argues that the decrease in welfare caseloads is not indicative of a decrease in need, but is instead due to tightened eligibility requirements such as: a wider definition of "living in a spousal relationship", increasing the wait period from one to three months if a person quit or was

[27] "Total Income" was calculated by the City of Hamilton using a QuickTax program and represents the maximum benefit one can receive. The calculation includes the basic allowance, shelter allowance, as well as additional benefits such as the Canada Child Tax Benefit or National Child Benefit Supplement, where applicable.

fired from a job, and the introduction of the work requirement for welfare (or workfare) for certain groups who were deemed employable.

The Coroner's Jury that investigated the tragic death of Kimberley Rogers in Sudbury, Ontario, made some very strong and relevant recommendations. Rogers was under house arrest, and had been cut off from welfare for collecting student loans and going to school at the same time as collecting benefits. In making recommendations around her death, the Coroner's Jury recommended that social assistance rates be modified to reflect the actual cost of living and "to ensure that they are adequate" *("Verdict of the Coroner's Jury into the death of Kimberley Ann Rogers" 2002.)*

RECOMMENDATION P: The Province of Ontario should increase minimum wage and social assistance rates to cover the basic costs of living. This should include indexing the shelter portion of social assistance to average rents, and reducing barriers to accessing benefits.

6.0 HOUSING

Long-term solutions to homelessness must include an adequate supply of safe and affordable housing. This section looks at a range of housing options: transitional, residential care facilities, supported or supportive, subsidized, and rental housing. The *Community Action Plan on Homelessness* recommended that the supply of affordable housing be maintained and expanded. The *Report Card on Homelessness* found that there had been no progress made on increasing the supply of housing in 2001. We gathered information from local organizations, the Community Housing Access Network, the City of Hamilton, Canada Mortgage and Housing Corporation (CMHC), as well as qualitative information from tenants.

6.1 Progress

6.1.1 Progress in Transitional Housing

Transitional housing is defined as medium term housing where stays range from six weeks to a maximum of one year. Some organizations have increased the supply of transitional housing available such as the Homelessness Intervention Project, with SCPI funding, who added two transitional apartments with supports for seniors who are at risk of losing their housing. Transitional housing beds for women survivors of violence have increased by eight to a total of 33 spaces due to SCPI funding. An additional three units funded by SCPI for men leaving correctional facilities are on hold due to zoning restrictions. One of the largest expansions of transitional housing occurred recently when the YMCA expanded the number of rooms available from 40 to 174 rooms for men who have experienced homelessness. Most of these beds had been previously occupied by men with a history of homelessness, but in 1998 were re-designated for students.

6.1.2 Progress in Supported and Supportive Housing

Supported and supportive housing are broad categories which mean housing with some type of supports to help people live independently. 'Supported' housing provides supports for a particular individual regardless of where they live. With 'supportive' housing, the supports are usually attached to a unit of housing rather than to the person. The Supported Housing Coordination Network has been very active in planning for community needs around supported and supportive housing. These models have been highly effective at helping people with a history of homelessness maintain and stabilize their housing *(Hamilton District Health Council, 2001; Neigh 2003).*

Several new projects in Hamilton, funded through the SCPI program and the United Way, increase supports to tenants in an effort to help people maintain housing. The ROOFS program, administered by Hamilton Housing, has provided some support to over 150 tenants in two buildings designated as "high need". They report success in preventing evictions, and increasing the feeling of safety. Sacajawea Non-Profit Homes, an Aboriginal run social housing organization, reports success in keeping people housed by having a support worker available to help tenants with ongoing issues. The Good Shepherd HOMES program has increased the number of people

housed from 143 to 155 as of November 2002. At a focus group held with HOMES participants, support for the program was very strong. As one person stated, *"I'm in the HOMES program, and I think that's the real solution [to homelessness]."* An outreach worker agreed: "*HOMES was fabulous, but filled up so quickly, that kind of housing was invaluable" (*in Neigh, 2003). There have been an additional 25 rent supplements with supports made available for people with severe mental illness.

6.1.3 Progress in Affordable Rental Housing

Several groups have responded to the shortage of affordable rental housing with innovative initiatives. Some examples of these are: The Threshold School of building, which is a not-for-profit organization that offers practical building instruction to the general public while working on local affordable housing projects. Sky Dragon Inc. is a non-profit organization devoted to progressive environmental and social change. They plan to offer affordable rental housing as a part of a community centre. Freedom House is a local organization dedicated to creating safe, accessible housing for members of the community who have disabilities. The Housing Trust Fund is a subcommittee of the Community Advisory Board on Homelessness who is working to establish a fund for leveraging resources to build affordable housing. They are currently undertaking a feasibility study of such a fund. 96 James St Non Profit Homes Inc. is a group of concerned citizens who are working actively to find ways to create affordable housing in Hamilton. In addition to these new efforts, the longstanding work of the Solutions for Housing Action Committee has continued to share information, coordinate new projects, and do advocacy in the areas of rental and subsidized housing. While few of these groups have produced additional units of rental housing, they represent an increase in capacity in the community.

The City of Hamilton has also taken steps in the housing field over the past year. City Council approved the *Social Vision for the New City of Hamilton*, which included the creation of affordable housing as a flagship initiative. Hamilton Affordable Housing Partnership Initiative is the City of Hamilton Housing Division's proposed plan to create an adequate supply of affordable housing in Hamilton. Its Housing Partnership Fund has been allocated $1.5 million. The city also has a $100,000 Housing Hamilton Innovation Fund to pioneer and stimulate innovative rental housing solutions. The City of Hamilton Housing Division will be developing the "Keys to the Home" - a housing plan for the City, which will become part of the Official City Plan *(personal communication, Housing Division).* Finally City Housing Hamilton has been given $1.4 million to develop new affordable rental housing.

RECOMMENDATION Q: The City of Hamilton, in its "Keys to the Home" housing plan, should prioritize the development of housing that will be affordable to people with incomes below the poverty line, people on social assistance, and people at risk of homelessness.

The guideline provided by Canada Mortgage and Housing Corporation is that no more than 30% of a household's income should be spent on housing. Housing costs above 30% become unaffordable. The best way to ensure housing is affordable to all members in the community is through rent-geared-to-income housing. Rent-geared-to-income housing ensures that tenants will pay no more than 30% of their income to housing. For people who are experiencing homelessness, or have very

low incomes, rent-geared-to-income housing is often an important step in securing permanent housing.

The new Federal/Provincial Housing Agreement is expected to create 700 units of rental housing over the next four years. This is fewer units than could have been produced had the Province of Ontario provided matching dollars as required by the Agreement. Instead, the Province identified existing dollars - and no new *dollars (personal communication, Housing Division, City of Hamilton).* The Federal Government has also re-announced the Residential Rehabilitation Assistance Program that will provide assistance to improve the quality of housing, although the projected impact of this policy is unavailable. There were 95 new units of rental housing built in Hamilton in the last year.

6.2 Challenges

6.2.1 Challenges in Transitional Housing

In 2000, the *Community Action Plan on Homelessness* made specific recommendations to stabilize funding for transitional housing for women and to establish a Settlement House for recent immigrants or refugees. There is no permanent transitional housing or settlement house in Hamilton for recent immigrants or refugees, nor are resources currently allocated to fund one. The Supporting Families in Transition program, funded by SCPI, has helped over 150 families (some of whom were recent immigrants or refugees) but funding is expected to end in the summer of 2003. This is in spite of Hamilton being the third largest destination in the country for newcomers to Canada and being a large centre for secondary migration because of its proximity to Toronto. Large groups of refugees continue to arrive in Hamilton. In 1999, approximately 750 Kosovar refugees arrived here. SISO estimates that 200 Pakistani families claiming refugee status, fearful of the post 9/11 registration policies in the US, would be arriving in Hamilton soon, as we are one of the first cities for refugees entering from the Buffalo-Fort Erie crossing. Over 300 Afghan families are expected to arrive in Hamilton in the next few months. Settlement and Integration Services Organization has identified 3,360 recent immigrants and refugees arrived in Hamilton between March 2002 and March 2003. Of these, 921 were refugee claimants and many face the increased risks of homelessness mentioned above. Without permanent funding for a settlement house or other transitional housing which offers culturally specific supports, these groups will have to compete for the already scarce housing resources and face cultural and language barriers to services.

Referrals for other forms of transitional housing continue to be much greater than the supply. Units for women leaving abusive relationships are able to accommodate between 10 and 25% of the referrals (personal communication, Phoenix Place and Second Stage Housing). The additional 134 units of transitional housing for men noted in the Progress Section was really a return to the status quo of several years ago. The YMCA reports that demand for the transitional housing has quickly filled 130 out of the 134 new units with a total of 170 out of 174 rooms rented (personal communication, YMCA) for men. The YWCA reports that they now have a waiting list for women in their transitional housing units (personal communication, YWCA). Emergency shelters for women report that the shortage of transitional and affordable housing options is forcing some women to return to abusive relationships.

RECOMMENDATION R: The supply of transitional housing for people at risk of, or experiencing homelessness should be expanded, particularly for recent immigrants, refugees and women leaving abusive relationships.

6.2.2 Challenges in the Supply of Residential Care Facilities

Residential Care Facilities (second level lodging homes) are privately run facilities that provide a wide variety of supports. Tenants of these facilities are often people with serious mental illness or seniors, who have difficulty living independently. The City and Province subsidize the running of these lodging homes. In December 2002, the City of Hamilton reduced the number of available subsidies from 1170 to 869. However, only 940 of the subsidies were in use at the time of the announcement, which resulted in the actual loss of 71 subsidies. Some people *are* being turned away from Residential Care Facilities because of this change, and as a result, some were forced to rely on the emergency shelter system (personal communication, City of Hamilton, 2003)

6.2.3 Challenges in Supported and Supportive Housing

The demand for these kinds of housing units far exceeds the progress that has occurred in the past few years. *The Hamilton District Health Council (2001)* identifies a total of 269 units of supported or supportive housing for people with severe and persistent mental illness. The same report estimates that over 3,000 additional housing units with supports are needed in Hamilton. Best practices research suggests that the majority should be in the form of supported housing *(HDHC, 2001).*

Somerville House provides 12 units of long term supportive housing for women with a history of homelessness but the service provider reports that they are always full, and unable to help many who could benefit from the program. Youth in our focus groups expressed a need for supported housing designed specifically for youth:

> *Some kind of semi-independent housing for youth, maybe apartment-like residency linked to services...people too old for CAS, but not ready to be on their own - an 'independent living' type of thing for youth...more independent than a group home, but still have parent like staff figures, learn life skills, mentoring, etc.* (Neigh 2003:46).

Housing supports available for persons with addictions continue to be under resourced. The Ministry of Health and Long Term Care had designated the above-mentioned 25 rent supplements for Addiction Services but these were conditional on supports being provided to tenants. There was no funding provided for that support and, with the Addictions sector unable to meet this requirement, the rent supplements were re-designated to Mental Health.

The recent report, *Housing Need Amongst People with Disabilities in Hamilton* (Neigh 2002a) found that "supports currently available in Hamilton are definitely inadequate to meet the need, both in terms of high-need individuals who require 24 hour on-site support, and in terms of individuals who only need a few hours of support a week. Provincial cuts to home care have adversely affected this latter group".

RECOMMENDATION S: The Provincial government should develop a Provincial Housing Strategy which would increase the supply of affordable, supported, and transitional housing options in Hamilton. In addition to responding to emerging needs, the supports should specifically address: people with a history of homelessness, men and women with severe mental illness, youth, seniors, and people with addictions. The Provincial Housing Strategy should also include new, matching funds for the Federal/Provincial Housing Agreement.

6.2.4 Challenges in Subsidized (Rent-Geared-to-Income) Housing

The *Community Action Plan and Report Card on Homelessness* both identified the shortage of subsidized housing as a contributor to the crisis of homelessness. The findings of this *Progress Report* show that there continues to be a limited supply of subsidized housing, and this shortage is leading to longer waiting lists for available spaces.

6.2.4.1 Limited Supply

Canada remains the only advanced industrialized country without a national social housing supply strategy. The Federal government withdrew funding for any new social housing in 1993. The Federal/Provincial Housing Strategy announced in 2002 addresses issues of rental housing supply, but the units thus produced are not necessarily social housing, nor affordable in any sense of that term and meaningful to people experiencing significant poverty (Shapcott, 2003; Hulchanski, 2003). In 2001 the Provincial government in Ontario de-volved the responsibility for social housing to the municipalities. Within social housing exists subsidized housing. The province legislates how many subsidized units are required for a given municipality. The number of units mandated by the province for Hamilton is 7,572. Currently no new social housing is being built in Hamilton. Although more people are being housed monthly, the number of households waiting (over 4,000) continues to increase faster than can be placed. The Community Consultation heard resoundingly and overwhelmingly that the supply of subsidized housing was inadequate and that waiting lists were too long.

"There are not enough affordable places to stay. The waiting lists for social housing are huge"

"Even a person who is in crisis ends up being on a waiting list for an extended period (for housing)...it's good that they give priority to [some people] but what about the rest of us" (in Neigh 2003).

The Community Housing Access Network (CHAN) manages the waiting list for these rent-geared-to-income (RGI) units in accordance with Provincial legislation. The number of people on the waiting list for social housing increased from a monthly average of 3,304 households in 2001 to 4,213 households in 2002[28] - an increase of 28%. This number does not include the 140 people removed monthly because they cannot be contacted. An average of 116 households were successfully housed each month in 2002 - this is an increase of 12% from 2001 when the average was 104 households.

[28] 2002 stats are January – November.

6.2.4.2 Limited Supply Affects Women Leaving Abusive Relationships

In 2002, there was a monthly average of 24 women who had priority status (called Victim of Abuse or "VOA"). Of these, an average of 13 were housed each month. Domestic violence is one of the primary causes of homelessness among women and long waits for subsidized housing puts these women at risk of continued and recurring violence. CHAN data, included in the Access and Equity section, shows that nearly half of women survivors of violence continue to live at home after applying for subsidized housing[29]. Increasing the supply of RGI units would help to decrease the number of women who are at risk of ongoing violence while waiting for housing.

6.2.4.3 More People Experiencing Homelessness Waiting For Subsidized Housing

"I am homeless - I am looking for a place but can't find one. I'm waiting for subsidized housing" (Neigh, 2003).

The number of people experiencing homelessness[30], who qualify for the special disadvantaged status, nearly doubled in 2002. The waiting list for people with homeless status has grown from a monthly average of 218 in January to 404 in December. Every month approximately 10 households who were homeless were housed. CHAN reports that this group is slow to house because once providers have met their 10% quota, they do not have to accept any new applicants from the "disadvantaged" list. Even with an updated waiting list the serious lack of new subsidized housing means one of the root causes of homelessness, the lack of affordable housing, cannot be addressed.

The Community Consultation Committee on Social Housing and the Housing Division at the City of Hamilton has recommended that the policy governing those with homeless status be changed from 10% of the total portfolio to every 5th vacancy. This change will hopefully lower the number of people who are experiencing homelessness who are waiting for subsidized housing. However, the committee also recommended to exclude both youth and newcomers from any priority status. The impact of these changes will be disproportionately shouldered by these already disadvantaged groups. Under the current guidelines, there are approximately four recent immigrant or refugee households successfully housed every month.

6.2.4.4 Lack of Tenant Rights

Hamilton's legal clinics, the Housing Help Centre, and the Advocacy Centre for Tenants Ontario have all recently submitted briefs to the Ontario Ministry of Municipal Affairs and Housing outlining serious concerns with due process for tenants under the Social Housing Reform Act. Though the issues are technical and complex, the concerns of tenant advocates outline the lack of ability to appeal the decision by social housing providers to withdraw tenant subsidies. If there is a decision to remove a tenant subsidy, the tenant's rent increases to market levels immediately. If the reasons for the removal of the subsidy were not sound, and there is a lack

[29] This data is based on 117 CHAN applications who had VOA status. The data was provided to the SPRC.
[30] Due to different Provincial legislation, this number does not include women who are fleeing violence.

of due process to appeal the decision, the tenant is likely to face extreme difficulty making the increased rent payments, and could be put at risk of eviction.

6.2.5 Challenges in Rooming Houses

A historic source of affordable accommodation is rooming houses—in which tenants rent a single room rather than a full apartment. For people at risk of, or experiencing homelessness, rooming houses are often the only option that social assistance rates are adequate to cover. There are 29 licensed rooming houses in the City of Hamilton *(MacNeil 2002:3)*. Eighteen of these participated in a study by the Housing Help Centre in 2002, and those 18 rooming houses had a total of 212 rooms with an average rent of $325.50. Recent academic research on rooming houses in Hamilton demonstrated that poor living conditions relating to the physical conditions, the requirement to share, lack of privacy, and safety and security issues, are rampant in such housing *(Mifflin 2002:95-102)*. MacNeil took two requirements from the City's rooming house by-law as indicators of by-law enforcement, and found that 28% had not posted required emergency contact information, and 67% did not provide tenants with lockable mailboxes. This suggests that the current regime for enforcing the by-law is inadequate *(Mifflin 2002:8)*. This is supported by the City of Hamilton's Building and Licensing Division's "limited, disorganized information" on the stock they are supposed to regulate *(Mifflin 2002:138)*. Current enforcement is complaints-based, but people who live in rooming houses are likely to be socially marginalized, and live with the threat of eviction, so they tend not to complain *(Mifflin 2002:139)*.

In fact, many rooming houses manage to escape even these minimally enforced licensing requirements as well as Ontario's usual legislation for landlord and tenant matters, the Tenant Protection Act. Through a variety of mechanisms they manage to fall under a piece of legislation--the Innkeepers' Act--which is substantially similar now to what it was when it was originally passed in 1914. This allows landlords to avoid any standards for their accommodations, and to evict without notice *(Mifflin 2002:123-4)*.

Mifflin's research concludes that, despite the value of rooming houses as low cost housing, private market rooming houses tend to function as "precarious" and "temporary" housing, and not to be widely useful for breaking the cycle of homelessness. However, the small stock of RGI rooms in the city, which are generally in better condition and can be associated with various housing supports, are a much better option for providing stable, safe, adequate, and affordable housing for low income tenants *(Mifflin 2002:143-8.)*

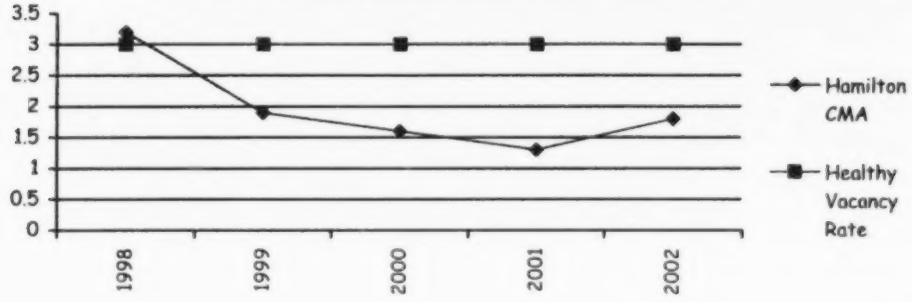
6.2.6 Challenges in Rental Housing

> *"I can sit with people and be a housing worker, but if they don't see any places to rent in the paper that the client can afford, what good is it to help people with the* process *of finding housing" - outreach worker (*Neigh, 2003*)*.

The rental housing market in Hamilton has continued to be extremely competitive. Average rents increased 3.2% in 2002 bringing the total increase over the last four years to 16%. The vacancy rate remains well below the "healthy" 3% level, at 1.8% for the new City of Hamilton. Increasing

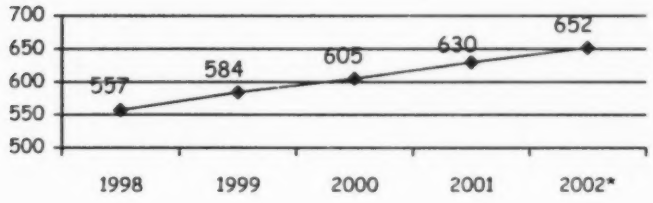
costs have been passed on to tenants and more renters are entering the system. All these factors combine to make finding housing that is affordable, available, and safe very difficult.

Chart 11: Vacancy Rates, Hamilton CMA, 1998-2002



Source: Canada Mortgage and Housing Corporation, 2002

Chart 12: Average Rents City of Hamilton 1998-2002



Source: Report Card on Homelessness 2002; CMHC 2002

> *"While you are waiting for social housing, it is not really very easy to find housing. References, credit history are barriers for newcomers. You hide the number of kids you have so that you can get cheaper accommodation, but you end up overcrowded. Most people have contacts before they come, and end up relying on family and friends" (in Neigh, 2003).*

Last year 95 new rental units were created in Hamilton, but less than 150 new units have been built since 1993. The City of Hamilton has estimated a need of 770 units annually for the next 10 years to meet the demands of population growth alone. Because the private market has not responded to the demand for rental housing the Federal government has recently announced a new housing strategy. The Federal/Provincial Housing Agreement is expected to create 700 rental units in Hamilton over the next 4 years (*personal communication, Housing Division, City of Hamilton)* but they have not guaranteed that these units will be affordable for low-income tenants.

6.2.6.1 The Impact of the Double Cohort

Another challenge that is expected to put tremendous pressure on the rental housing market in Hamilton is the double cohort. With two years of graduating highschool students arriving simultaneously for post secondary education at McMaster and Mohawk in the Fall 2003, demand for rental housing will certainly increase. The West End of Hamilton, where McMaster is located is already the tightest rental market in the City with a vacancy rate of 0.7%. Pressure for rental housing in the West End is expected to create a ripple across Hamilton.

6.2.6.2 Increasing Hydro Rates

In 2002, the unexpected cost of skyrocketing hydro rates put many tenants at risk of losing their housing.

"Hydro slows me down, there's not much money left over for food"

"Hydro is killing us" (in Neigh, 2003)

Many households discovered their hydro bill had doubled because of Provincial deregulation. The Housing Help Centre found as costs increased, landlords who traditionally included utilities in the total rent, began to off load heat, hydro and water to the tenants.

Table 6: Utilities Costs for Tenants

Type of Utility	% of units which included utility in cost of rent	
	April 2002	October 2002
Heat	92%	71%
Hydro	52%	30%
Water	94%	72%

Source: Vacant Rental Market Survey, 2002. Housing Help Centre.

Having an adequate supply of affordable rental housing is key to reducing the crisis of homelessness. The small increases we have seen in Hamilton rental units of the past few years are outweighed by the chronic under supply and growing population demand. Other factors such as increased rent costs, the student double cohort and rising utilities all combine to make the situation more difficult for households searching for suitable housing.

RECOMMENDATION T: The Federal government should expand its Federal/Provincial Housing Agreement to increase the amount of affordable housing that will be produced. As well, the housing that is produced should be affordable for people living at or below the poverty line. As one example, the Federation of Canadian Municipalities (1999) developed an affordable housing strategy which would reduce homelessness. The recommendations in that report should be implemented.

6.2.7 Challenges in the Quality of Housing

With rents rising and limited availability of rental housing, low-income tenants must often resort to living in substandard housing. As has been reported in *Our Homes and Our Streets* (Todd & Brown, 1999) and the 2002 *Report Card on Homelessness*, there is little empirical information that allows us to assess the overall quality of rental housing stock in Hamilton[31]. But a recurring theme we heard when consulting the community was that substandard and dangerous housing conditions are a common experience of low-income tenants (in Neigh, 2003).

"My friend lives in a townhouse, and his mom is on disability. Their place needed a new screen door. There was a big hole at the bottom that was letting all this cold air into their apartment, and they had to put plastic bags over it, to keep the air out. The toilet was leaking upstairs and there was a hole in the ceiling because of the leak".

"I have a son and there was mold growing on the wall in his room."

"Repairs take forever - during the weekend last winter, my pipes froze, we had no water yet I was told to wait until Monday to have it even looked at".

People living in unsuitable accommodations are experiencing relative homelessness. Traditionally this is a group of people that are overlooked when considering the scope of the homelessness crisis. The recurring theme of unsuitable housing rising from our consultation with the community reinforces the knowledge that many Hamiltonians live on the edge of homelessness.

RECOMMENDATION U: The City of Hamilton's Building and Licensing Department should develop a method to monitor the quality of housing in Hamilton and to enforce basic standards. Reports should be made publicly available summarizing the findings of these methods.

6.2.8 Challenges Related to Housing and Discrimination

> *"While homelessness is certainly related to a scarcity of affordable apartments, it is misleading to understand it solely in those terms" - Centre for Equality Rights in Accommodation (CERA).*

Many people told us that they were having trouble finding housing not only because there was not enough housing (supply issues), but because they were being denied access to the housing that was available. The community consultation provided qualitative evidence that issues of access to housing is important to why people who are homeless or at risk of homelessness are unable to secure housing.

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[31] The City of Hamilton's Building Department must respond to complaints about housing quality, but do not compile that information into a useable format. If compiled, that information would be a useful indicator of housing quality.

Here are a few examples of what people told us:

"Landlords don't want to rent to young people - especially if they are on welfare"

"They [landlords] look at you completely differently when they find out you are on social assistance"

"One time when I was looking for an apartment, they took one look at me, saw I was a big Indian, and probably thought I was a drunk. A lot of places don't rent to Indians."

"We don't have a job. We have welfare. The landlords don't like this. And now, so many landlords say 'If you are Hungarian, sorry, we don't give you the house. I don't like Hungarians. You can't pay every first of the month'"

"I'm on disability; I was looking at one place that had three or four steps to get to the front door. The landlord wouldn't rent the place to me because he was worried I might fall down the stairs and he would be sued".

"It's hard to find a place because I've got long hair and my skin isn't white enough for them".

"the landlord kicked them out because they were gay "

"Each time I go to look at a room, I face racism and discrimination because I am native: When I call to look at the room, they are friendly and welcoming, even after explaining that I'm on ODSP and don't have first and last month's rent. Then when I show up, they say I'm sorry, a guy who had first and last has rented it'. Then my non-native friends call, asking about the apartment for rent and they are told it's available".

"I really hate the landlords here because they discriminate if you're a single mom. They want to know why, they want to know every single detail, but it's none of their business".

"He was looking at my application, when another clean cut, white guy came in to apply, and I saw him [the landlord] turf my application in the garbage. He then told me he would be glad to rent to me and told me he would get back to me. How is he going to get back to me if my phone number is in the garbage?"

Under the Ontario Human Rights Code, it is illegal for landlords to discriminate against the following groups of people: racially visible people, people of ethnic backgrounds, people with different sexual orientations, people of different gender, people of different marital status, people with disabilities, persons on social assistance and people of different family types (from CERA, Homelessness Forum Presentation, Feb 2002).

The lack of affordable housing in Hamilton is felt even more strongly if you are a member of a group that is openly discriminated against. The Centre for Equality Rights in Accommodation, based in Toronto, believes communities must allocate resources to do advocacy work specifically

related to this area (CERA, Homelessness Forum). By not addressing discrimination as a barrier to housing we misunderstand the true dynamics of the housing market. Many Hamiltonians are unable to access housing because of overt discrimination.

***RECOMMENDATION V:** Local funders, in partnership with all levels of government, should allocate money to do advocacy work specifically in the area of discrimination and housing. This could include exploring the opening of a Hamilton branch office of the Centre for Equality Rights in Accommodation, a Toronto-based organization that deals with both casework and policy advocacy around discrimination and housing.*

7.0 'THE ORIGINAL HOMELESS' - ABORIGINAL ISSUES

When the Homelessness Evaluation Committee was developing the goals and objectives of this *Progress Report* on Homelessness[32], they identified the need to incorporate an understanding of the unique conditions and causes of Aboriginal homelessness in Hamilton. The committee set out an objective to have the Aboriginal content of the *Progress Report* researched and written by a member of the Aboriginal community. Separate funding was obtained from the Urban Aboriginal Strategy - Homelessness fund, and an Aboriginal Evaluator was hired to work with the Social Planning and Research Council to create this section of the *Progress Report*. This section of the *Progress Report* is intended to educate the non-Native reader about the unique conditions and causes of Aboriginal homelessness.

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In the spirit of welcoming, giving thanks, and acknowledging; I present to you a shortened version of "**The Thanksgiving Address**" (with permission, as told by Al Loft, Iroquois Elder). I have chosen this version because of the length constraints of this document as the "real" version can take a full three days to relay its oral messages. This can be viewed as the Original Peoples' or Onkwehon:we "Acknowledgement", said daily and at meetings and ceremonies.

OHEN:TON KARIWENTEHKWEN (THANKSGIVING ADDRESS)

THE PEOPLE: *We have been given the duty to live in harmony with one another, and with other living things. We give thanks that this is true.*

MOTHER EARTH: *We give thanks to our Mother Earth. All that makes us strong and alive comes from you. We are all like children as we walk upon you. You nourish us and all living things.*

THE WATER: *We give thanks to the waters for our well-being. You quench our thirst. You give strength for plants and animals and for many medicines.*

PLANTS: *We give thanks to the plant life. Within you is the energy that sustains many life forms. You give us food, medicine, and beauty.*

TREES: *We give thanks to the trees of the forest. You give us shelter and fruits of many kinds. Your beauty is ever-changing.*

ANIMALS: *We give thanks to our animal brothers. You are still living in your hidden places and we see you sometimes. You still give us food, clothing and beauty.*

BIRDS: *We give thanks to the winged creatures, you remind us to enjoy our life cycle.*

THE FOUR WINDS: *We give thanks to the four winds. We listen, and hear your voices as you blow above our heads. Always you bring us strength. You come from the four directions.*

THE SUN: *We give thanks to Brother Sun, as you travel across the sky, you nourish Mother Earth. You give us warmth, energy, and light. Your cycle changes, to allow all life forms to be reborn with every sunrise..., is a miracle.*

GRANDMOTHER MOON: *We give thanks to Grandmother Moon. We see your face shine for us at night. Your cycle provides new life on Mother Earth.*

THE STARS: *We give thanks to the stars. You are the helpers for Grandmother Moon. You make the sky shine at night, and we admire your glowing beauty.*

THE CREATOR: *We give thanks to the Creator. You have prepared all these things on Mother Earth for our peace of mind. We see that all things are following your teachings. All together, we give thanks to you, the CREATOR. Nya:weh Kowa (Thank you very much) Al Loft*

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[32] See Appendix A.

Please forgive me and extend your patience; for all things that I may have forgotten; for my poor usage of my Native language; or for anything that may not be expressed in the manner in which it was intended, it is neither personal nor intentional. Please also indulge my humble attempt to write in the first person, as I have consciously chosen to write in an inclusive manner, on behalf of the Hamilton Aboriginal community and as a member of this community. Nia:wen Kowa Tanon Kenoronhkwa (Thank you very much and I love you), Cindy Sue (Montana) McCormack

7.1 Defining Homelessness From An Aboriginal Perspective

Sekoh, skennenkowa ken? In English, this is interpreted as "Hi, how are you?"; whereas in Mohawk, this means "Hello, do you carry the GREAT PEACE within your heart and your mind?" The meaning questions your perspective and mindset and challenges you to help others achieve that 'peace' or place of well-being. As in the difference of language interpretation, so is there a difference in the understanding of homelessness within the Aboriginal community.

In the words of Matthew Coon Come, National Chief, Assembly of First Nations:

> *"Our people are unemployed. Many live in poverty and hopelessness... Our children have no jobs - but worse, they have no hope of finding a job. They watch their parents sink into hopelessness and alcoholism. They can leave the reserve and become part of the homeless and unemployed that roam the tenderloin of (cities)...there is a cost for social justice. There is a greater cost for doing nothing."* (in the *Homelessness Trail*, p.34).

Dr. Taiaiake Alfred, a Mohawk scholar is quoted here describing the issues of poverty and homelessness, and their importance regarding the future of Aboriginal people.

> *"Material poverty and social dysfunction are merely the visible surface of a deep pool of internal suffering. The underlying cause of that suffering is* ***alienation*** *- separation from our heritage and from ourselves. Indigenous nations are slowly dissolving the continuing loss of language, land and young people. Although the indigenous people of Turtle Island - the land we now call Canada and the United States - have survived the most severe and extended genocide in human history, the war is not over yet. Our bodies may live without our languages, lands or freedoms, but they will be hollow shells. Even if we survive as individuals, we will no longer be what we Rotinohshonni call Onkwehonwe - the real and original people - because the communities that make us true indigenous people will have been lost. We will be nothing but echoes of proud nations floating across a landscape possessed by others (in Freeman, 2003).*

7.1.1 The Importance of History

Although this report may present the many issues and key messages of the Hamilton Aboriginal community relating to homelessness, the one reoccurring and often impassioned foundational sentiment is the lack of public awareness regarding the long history of homelessness of

Aboriginal people. In order to understand the present Aboriginal homelessness, as in the process of planning, you have to understand where you've been. To understand the **alienation** that Aboriginal people experience that results in poverty, homelessness and the many varied social dysfunctions, is to understand the importance of history. Long & Dickason (1996) state it best, "*The past cannot be undone, but it can be **better understood and acknowledged** as part of our common history as Canadians*".

It is my understanding that the Two-Row Wampum explains and establishes the relationship between the Iroquois people and the Europeans whom they welcomed to this land. A wampum belt (a belt that used beads and shells to show a picture or meaning) was a way of keeping a historical reference, a way of 'writing' something down for our Aboriginal ancestors who were an oral society. It explains the idea of two boats traveling down the same river, co-existing side-by-side, but existing separately regarding religion, politics and governmental rule or in essence, 'a way of life'. It could be explained as the original distinct society clause. The subsequent non-adherence to this 'agreed upon' defined relationship, can be considered a basis for a longstanding history of mistrust by Aboriginal people that continues to this day.

It is our sincerest hope that having an Aboriginal Section within this *Progress Report* will aid in the need for recognition and acknowledgement of the diversity of racial backgrounds in responding to homelessness. However, to achieve this end result, emphasis should be assigned to what John Kim Bell (National Aboriginal Achievement Awards) states best,

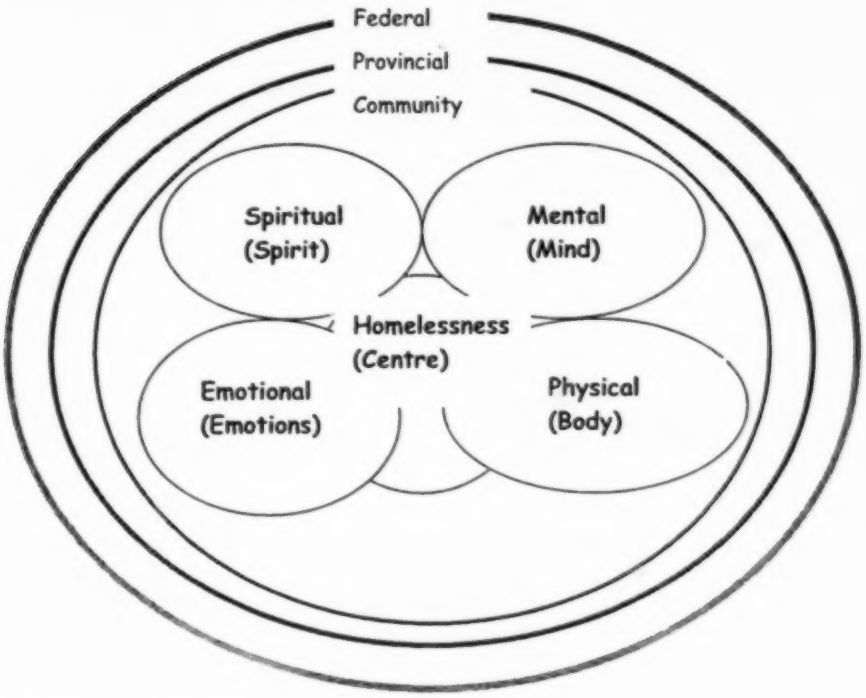
> "*For Aboriginal people...our culture is imbedded in our collective rights...we are self determining...The need to restore Aboriginal identity is paramount. We are no different than other cultures, except that they have their culture and we do not!*"

7.2 A Model to Understand Homelessness from an Aboriginal Perspective

In contemplation of how to present the Aboriginal information while attempting to incorporate an Indigenous system of beliefs (an Aboriginal Philosophy and Ideology), the model below represents how everything is of equal importance and all parts are a sum of the whole. In viewing homelessness from an Aboriginal perspective, giving thanks, acknowledgement and respect to all things in the interconnected web of life; we must learn to define solutions based on, the equal importance of all 'strands' within this web. In order to address homelessness, this model can be best understood as these 'strands' being broken or in need of repair, thereby emphasizing the imperative necessity to strengthen, rebuild or restore these 'strands'; resulting in progress towards these broad principles of evaluation. In the words of Chief Seattle in 1854, "***All things are connected**. Man did not weave the web of life - he is merely a strand in it. Whatever he does to the web, he does to himself.*" This "Life-view Statement" expresses the holistic view of all things being inter-connected.

This Aboriginal framework (model) will begin with the Centre (the Homeless Individual) while striving to incorporate the Mental, Physical, Emotional and Spiritual realms that affect the 'Centre' or individual experiencing homelessness. Aboriginal teachings of the four fires of Mind, Body, Emotions and Spirit stress the importance of these realms when trying to achieve a wholeness or balance of the individual.

Figure 1: A Model to Understand Aboriginal Homelessness- the Homelessness Web



7.2.1 The Centre (The Homeless Individual)

In the pursuit of empirical evidence, a very important academic phrase, it was timely that Statistics Canada had recently released a report on Aboriginal People of Canada, 2001, (see Appendix H). Nia:wen Kowa Shonkwaia'tison (Thank You Very Much Creator). The gathering of 'empirical evidence' has been a long-standing problem within the Aboriginal population. It should be noted that even Statistics Canada recognizes that their numbers are an under representation of Aboriginal people. It has noted that 30 Indian reserves and settlements did not get enumerated. This would therefore affect data re: North American Indians registered under the Indian Act; and was due to lack of participation on reserves. Statistics Canada also recognizes that "*the Indian population is relatively young and mobile and thus more likely to be missed by the census*". What Statistics Canada does not state, but is well known within the Aboriginal community, is that Aboriginal people overall (on or off reserve), are less likely to participate in the enumeration process. As previously explained ('Two Row Wampum'), this is due to an overall multi-generational mistrust of the government.

Drost, Crowley and Schwindt (1995) found that 11,020 Aboriginal people live in Hamilton, representing 1.8% of the total population. In consultations with the Hamilton Aboriginal community, it has been estimated that there are currently between 12-15,000 Aboriginal people within Hamilton, encompassing approximately 2% of Hamilton's population. Aboriginal people are

highly over-represented among the homeless population with conservative estimates at 20%. Again, the difficulties gathering comprehensive information about who is homeless in Hamilton limits our ability to respond with specific strategies. We do have estimates from the few mainstream programs who have kept statistics on Aboriginal usage:

- The Wesley Centre estimates 22-26% Aboriginal usage;
- The Booth Centre (Salvation Army) estimates 15%;
- The Mac Door reports 15% Aboriginal youth in their program; and
- Living Rock also reported between 16-22% Aboriginal youth participation in some programs.

The difficulty of mainstream agencies in gathering homelessness statistics identifying Aboriginal participation can be attributed to many factors including: lack of resources, lack of knowledge of what to do with the information gained, perceived violation of anti-racism, anti-discrimination or anti-harassment policies, or even the perceived threat of competition for future monies. There is also reluctance by Aboriginal people to self-identify when organizations do make efforts to gather statistics, largely because of the alienation and mistrust mentioned above. However, with increased Aboriginal involvement, led by and involving HEDAC, and the incorporation of cultural sensitivity awareness, and increased collaboration with the mainstream community, these difficulties gathering statistics can be overcome. Some progress has been made, as evidenced by the participation of the few insightful forerunners listed above, and we thank them for their courage and willingness to begin this process.

RECOMMENDATION W: Funding allocations should take into account and respond to the changing demographics of who is homeless in Hamilton. For example, as Aboriginal homelessness has been conservatively estimated at 20% (compared with 2% of the overall population of Hamilton) then it could ensue that every one out of five dollars should be targeted to address Aboriginal homelessness.

7.2.2 Progress in Aboriginal Homelessness Planning in Hamilton

The Aboriginal community in Hamilton has been actively involved with planning around homelessness, including the following activities:

- The implementation of the Urban Aboriginal Strategy on Homelessness (1998), which involved the lobbying efforts of the Niagara Peninsula Aboriginal Area Management Board (NPAAMB) to promote public awareness while emphasizing local community control;

- The development of the *Aboriginal Community Action Plan* (1999-2000) by the Aboriginal Labour Force Development Circle (ALFDC). The ALFDC is the Provincial body that administers and monitors the Urban Aboriginal Strategy - Homelessness funds (UAS-H) for the cities of Toronto, Ottawa, and Hamilton.

- From 2000 to 2003, the HEDAC has identified and updated community priorities and made funding allocations decisions.

- Other planning strategies have included:
  - Two training symposiums on Aboriginal Homelessness;
  - The publication of *The Homelessness Trail: The Voice of the People,* and
  - Public education strategies (i.e. Kelly Isn't Homeless Anymore Button, Homelessness Videos);

Hamilton Executive Directors' Aboriginal Coalition (HEDAC)

The HEDAC is an example of partnerships with its membership of 16 Aboriginal organizations, which operates on a consensus based decision-making process.

> *"where everyone is given the opportunity to offer input, ample time is allowed for open discussion; while keeping in mind what is in the best interest of HEDAC as a whole...following true Haudenosaunee consensus making, there shall be support for the chosen decision, even by those previously opposed; with no further criticism. Therefore; traditional values of humility, bravery, wisdom, honesty, truth, love, patience and respect shall guide our work together as a whole unified group. Through the following of these values, we will also remind one another to adhere to the HEDAC Code of Ethics"* (HEDAC, Terms of Reference, July 2001).

Aboriginal groups are by no means homogeneous, but HEDAC recognizes the benefits of a united Hamilton Aboriginal voice. This important work requires support and administration to build on its successes, yet the provision of administration is an ongoing struggle within the HEDAC. It has set a precedent across Canada for an urban Aboriginal setting; there is a need for organizational growth to better coordinate the ideal of a united urban Aboriginal voice.

The Aboriginal planning process has continued with the recently formed sub-committee of HEDAC, called the Hamilton Aboriginal Homelessness Advisory (HAHA) Planning Committee. The HAHA Planning Committee has held its inaugural meetings to review where the Aboriginal Community has been in order to pave the way for future activities.

Recommendation X: That funding be identified and allocated to support community development and community-specific efforts to address homelessness. As an example, funding for administrative support of the HEDAC to further the unified efforts of the Hamilton Aboriginal community to address homelessness should be provided.

7.2.3 Preventing Youth Homelessness In the Aboriginal Community

The Aboriginal "worldview" holds a very proactive, futuristic outlook when dealing with our children and youth. It suggests that we keep in mind, what will be best for the next seven generations to come. In Hamilton, there is a high representation of Aboriginal youth. As identified in the Youth Barriers Report, "*There are an estimated 2300 to 2500 Aboriginal youth 15 to 24 years old in Hamilton. The number of Aboriginal youth is expected to increase significantly over the next 10 to 15 years"* (Martin & Trudeau, 2003:15). Similar to Aboriginal adults, Aboriginal youth are highly over-represented among the homeless population. There are a

number of reasons that Aboriginal youth are at higher risk of homelessness than non-Aboriginal youth. In addition to the historical factors, urban Aboriginal youth face barriers to employment and participation in school. These barriers result in increased poverty and a lack of employment options.

The recent *Hamilton Aboriginal Youth Stay In School Initiative report* (Stevenato, 2003), identifies the reasons why there are high dropout rates of Aboriginal students from Hamilton high schools as:

- Discrimination/racism/prejudice
- Lack of self esteem
- Low socio-economic status
- Lack of cultural sensitivity
- Lack of interest
- Lack of support from teachers/schools
- Lack of family support and encouragement
- Substance abuse
- Truancy
- Culture and communication barriers between parents/teachers/principals and schools.

A focus on youth education and training, skilled trades and apprenticeship, literacy and basic skills will build the skills of youth and improve their participation in Hamilton's future labour force. The recent report by the City of Hamilton, *HR Matters*, identified that the number of youth, the future generation of workers, were contracting in size relative to their adult counterparts *(HR Matters, 2002).* This is not the case with Aboriginal youth as statistics show a growing younger Aboriginal population. Ensuring that Aboriginal youth are equipped with the necessary skills will help them avert poverty and the risk of homelessness.

7.3 Mental (Mind)

Within the 'MENTAL' aspect of this model, information on historical, systemic root causes of homelessness of Aboriginal people will be presented, touching on the areas of genocide, residential schools, and foster care. The multi-generational effects that have converged to create the present situation of homelessness are symptoms of historical experiences that continue to oppress, marginalize and discriminate; affecting our mental well being and society's perception of Aboriginal people on the whole.

7.3.1 Aboriginal Genocide

Colonialism, dehistorization, dehumanization, dichotomization, patriarchy, assimilation, Extinction, oppression, integration and acculturation; you've heard these words time and time again when

dealing with Aboriginal people. Ward Churchill's book "*A Little Matter of Genocide*" *(1998)*[33], describes the historical experiences and social practices endured by Aboriginal people in the Americas for the past 500 years. From the arrival of Columbus in 1492, when there were an estimated 125 million Aboriginal people to 1893, when fewer than a quarter million Aboriginal people were left (reduced by over 90%). The words "cultural genocide" can be used to explain the oppression and the loss of our inherent rights, freedoms, culture, language and traditional ways of life; the loss, theft and/or displacements of our children (i.e. residential schools, foster care) and of our lands. This history is the beginning and the cause of homelessness among Aboriginal people today.

We've endured re-location, a multitude of forced marches and internments; our ancestral homes have been taken from us and continue to be taken from us to this day (i.e. OKA, Stoney Point). We are still dealing with the multi-generational effects of these practices and policies of extinction, assimilation and acculturation, hence the arrival of the word homelessness. We now have 500 years of experience of being homeless.

Genocide is such a harsh word and even harder to accept that this has occurred within our 'civilized' society. The United Nations Convention on Genocide describes the five categories of genocide to include:

(1) Killing members of the group;
(2) Causing serious bodily or mental harm to members of the group;
(3) Deliberately inflicting on the group conditions of life calculated to bring about its physical destruction in whole or in part;
(4) Imposing measures intended to prevent births within the group; and
(5) Forcibly transferring children of the group to another group.

History abounds with evidence of this genocide such as: Wounded Knee (Dec. 15, 1890, where 400 Indians were massacred); biological warfare (i e. Intentional smallpox contamination); sterilization practices - where in the USA in the 1970's and 1980's, it is estimated that 42% of Native women were sterilized, and still practiced in the mid 90's in Canada on the Lubricon Cree of Nothern Alberta (Martin-Hill, 1996a); residential schools; and the adoption policies of the 1980's in Canada, with statistics that 43% of all children in foster care have been identified as Native children, and 26% are adopted out to non-Native families (Martin-Hill, 1996b).

7.3.2 Residential Schools

The Residential School system continues to wreak havoc on the effects to our children, our grandchildren, and to us. Many of our Grandmothers and Grandfathers are still alive and remember, although many refuse to talk about the atrocities they endured. Introduced as early as 1830 (i.e. Coldwater Reserve - missionary controlled schools); 1840's with the Bagot Commission Report (boarding schools with farms, a form of manual labour schools) funded by the

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[33] In Churchill's book, various denials of the Jewish holocaust are described and refuted, thereby, paving the road for the inclusive use of the word "genocide", and for comparison to the genocidal historical experiences of the Aboriginal people of the Americas.

Canadian Government and run by Christian religious groups without any parental involvement, this system was forced upon Aboriginal children between the ages of five and fifteen.

The mental impacts were many, resulting in vast areas of social dysfunction, resulting in increased homelessness today. The loss of culture where children were punished for speaking their Native language, practicing their Native traditions; thereby ensuring that their spirituality, identity and nationhood were *not* passed onto the next generation; ultimately created 'cultural voids' and a 'lost generation'. The loss of parenting skills combined with the loss of nurturing abilities which come from generations of parents without their children are some of the most damaging impacts of the Residential School system. As Long & Dickason (1996) state,

> *"Subjugation has taken its toll on our cultures. Indigenous peoples have the highest rates of impoverishment, incarceration, suicide and alcoholism in Canada. Much of this can be traced back to the abuse received at the residential schools".*

7.3.3 Aboriginal Foster Care

Although things are starting to change, in some ways they stay the same. The issues of mistrust, lack of Aboriginal identity, evidenced by genocidal practices and residential schools; are 'broken strands' in the model to understand today's homelessness among Aboriginal people. This carries on with the issue of Aboriginal people and mainstream foster care, where the strand between family and community continues to be broken.

Even in the best of circumstances, many Aboriginal foster or adopted children grow up caught between two worlds (and that's if they are even aware of their roots). In a recent focus group, one young woman's answer to a question about what barriers were faced captured these challenges: *"Life is a barrier! We discriminate against ourselves from within"* (Neigh, 2003). In a book on the writings of Indian women, Brant (1998) puts out a call for material and receives this letter (pg. 9), *"Dear Beth, Please help me find out who I am. My mother was Indian, but we were taken from her and put in foster homes. They were white and didn't want to tell us about our mother. I have a name and maybe a place of birth. Do you think you can help me? I always wanted a sister."*

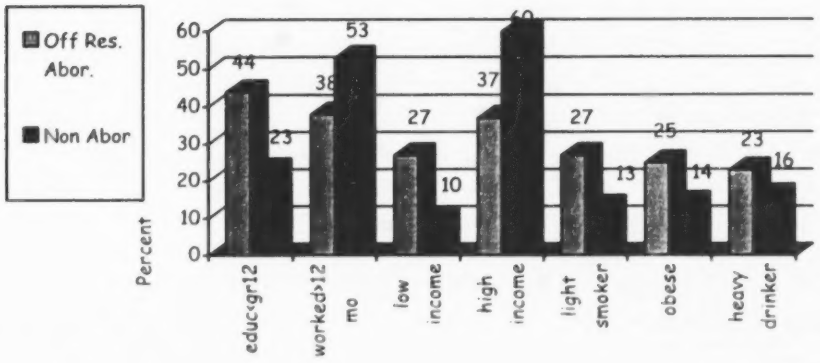
The love of a brother or sister, the sense of family, the feeling of belonging and being accepted unconditionally by an Aboriginal community, the opportunity to learn of your roots and your culture - that heartbeat, that association to our land, that underlying sense of hope or will (imbedded within 500 years of persistence/resistance); can have the greatest positive impacts mentally, physically, emotionally, and spiritually.

Aboriginal-specific foster care arrangements are one solution to this long history of loss of culture and alienation. In Hamilton, HEDAC has supported and endorsed Guiding Hand Inc. (Eyetiyahahagwea), an Aboriginal organization who has recently applied for and been approved for foster care licensing through the Ministry of Community, Family and Children's Services.

7.4 Physical (Body)

As we enter the next circle of our 'Homelessness Web', we will present further empirical evidence. The non-Aboriginal community is sometimes unaware of the overwhelming disparities between Aboriginal and non-Aboriginal health determinants. These health determinants are key factors in understanding the risk of homelessness.

Chart 13: Health Determinants, Off-Reserve Status vs Non Aboriginal 2000/2001, (Canada, ages 15 and older)



Source: Statistics Canada

Overall, Aboriginal people have poorer health than other Canadians. 23% of Aboriginal people living off reserve rated their health as fair or poor vs. 12% non-Aboriginal (1.9 times higher). This disparity exists across all geographic regions and income levels. 60.1% off-reserve Aboriginals vs. 49.6% non-Aboriginal reported at least one chronic condition (i.e. Arthritis, high blood pressure or diabetes); and Aboriginal life expectancy is estimated to be six to eight years shorter. 13.2% of off reserve Aboriginal population reported a major depressive episode in the past year (1.8 times higher than non-Aboriginal population), and 16.2% of off reserve Aboriginal population reported a long-term activity restriction (1.6 times higher than non-Aboriginal population). The end result is a sickness and broken strands that transcends the mind, body and spirit into the 'emotional' circle of our 'web', resulting in increased risks of homelessness.

7.5 Emotional (Emotions)

With increasing client needs comes an increased demand on resources and outreach services. The Aboriginal community has identified the common human resource issue of 'burnout', affecting many of their valuable employees, resulting in high staff turnover and therefore having an "*all things are connected*" negative effect on service to their people experiencing homelessness. It is important to recognize and acknowledge the immediate needs of the people who are homeless. The emotion strand gets involved when we try and balance immediate needs with long-term

solutions. What we believe will be best in the long term, may not fall in line with what people experiencing homelessness identify as immediate priorities. Within the Aboriginal focus groups, many community members identified immediate needs as: money (i.e. equality in work or income, quality food, end of month concerns, holiday & special occasions, overall participation in life events, social activities); safe, affordable, quality housing (without mold, without cockroaches, without crack addicts); services (i.e. transportation and support systems) and access and equity (i.e. Discrimination, racism, and ageism etc.) *(in Neigh, 2003)*.

Although community and individual consultations may result in recommendations for reactive short term solutions; there is a growing trend to identify long term proactive or preventative solutions such as, "*A Native Residence or Long Term Health Building - that would be great!*" A gathering place or drop-in centre for Aboriginal people, "*a safe place to hang around, play cards, play pool, congregate & feel good; this is a first step in the healing journey*", (i.e. Urban Aboriginal Multi-Complex Centre - idea of one stop shopping for access to services); or even an "Educational Native Advisor" (i.e. Stay In School Initiative) *(in Neigh, 2003)*.

Aboriginal organizations are sorely under-resourced, lack long term funding and sustainability. As service providers, Aboriginal organizations are keenly aware of the balance between immediate needs and longer-term solutions that must be found. The importance of allocating monies in longer-term solutions such as research (i.e. Feasibility studies), documentation (i.e. Reports) or even administrative capacities (i.e. Grant proposals); contradicts their responsibility to help the client immediately.

7.6 Spiritual (Spirit)

The need to address Aboriginal homelessness with Aboriginal-specific programming has been recommended in previous reports and is a way to address our spiritual needs. These recommendations include to "*Increase access to culture, spiritual and traditional healing*" and to "*Develop additional Aboriginal specific programs/services for homeless to fill gaps*" *(Homelessness Trail, 2001)*. Emphasis on '*Cultural activities and traditional teachings - celebrating Aboriginal culture, health and wellness*' was identified as an emerging theme of historical spending in an evaluation of Urban Aboriginal Strategy progress *(Freeman, 2002)*.

The *Homelessness Trail* also found that 85% of Aboriginal people experiencing absolute or relative homelessness felt that an Aboriginal specific service would make a difference; and 70% of all respondents found the services provided by Aboriginal agencies to be useful. "*This addresses the importance of offering services that do not make people feel embarrassed or humiliated...they should feel welcomed, respected, secure and trust the staff.*" *(Homelessness Trail, 2001: p. 23)*

Many programs that address the 'Spiritual' aspect of our homelessness 'web' are offered in the various Aboriginal organizations. One that stands out in my humble eyes (and is not meant to take away from any of the others), is the volunteer group called the 'Healthy Aboriginal Men's Circle'. They have been addressing homelessness before they were funded, and will continue to do so at the end of March 2003, when their current funding ends. In the true spirit of inter-connectedness, the well-being of 'Healthy Aboriginal Men' is tied to the centrality of family,

which promotes healthier families and ultimately a healthier community. From Jan. - Dec. 2002, this program reports 1,387 members in attendance (HRIC AGM 2003). Al Loft (HAMC Coordinator) further states in this report "*we are being looked at as role models...to include men and to give honour and support to them... To help to stand their men up and remind them of their responsibilities and duties to each other and their communities... We have to walk beside each other on the Journey of Life, and to support one another with equal duties. Giving one hundred percent of ourselves for the good of the whole. By doing so, there is no room for dissention, because the responsibilities become 'One Good Mind'.*" Nia:wen kowa Al tanon kenoronhkwa, CSM.

The establishment of Aboriginal organizations such as the Niwasa Head Start Pre-School and the Aboriginal Health Access Centre (De dwa da dehs nye>s) are shining examples of Federally and Provincially recognized government initiatives that deliver Aboriginal specific programming. Niwasa Head Start pre-school, an early intervention program established for the health and well-being of urban Aboriginal pre-school children and their families, fosters the spiritual, emotional, intellectual and physical growth of each child and contributes to learning and positive transition into mainstream elementary schools. De dwa da dehs nye>s (the Aboriginal Health Centre) which assists Aboriginal people regardless of status in accessing culturally appropriate healthcare programs and services, including primary health care, outreach services, health promotion and education, advocacy services, and complementary therapy.

7.6.1 Language

In the importance of recognition and of the healing journey, the language 'strand' has been broken. There has been a decrease of Aboriginal people that can conduct a conversation in an Aboriginal language (24% in 1996 compared to 29% in 1991; Statistics Canada, 1996). A decrease of 3.5% also occurred in Aboriginal language as a first language learned at home. If we don't use it, we'll lose it; a burgeoning concern, as 10 out of 60 Aboriginal languages in Canada are extinct and 12 more are on the brink; with our fluent speakers getting older and older. The elders didn't teach for many years because they didn't want us to suffer what they had (i.e. Residential schools). However, language is a powerful healing tool. The elders now teach us that language is culture, and it is why we are here as Aboriginal people in Canada. It is and should always be considered, an integral aspect of 'Indian Revisionism' (promoting the positive perception of Aboriginal people).

7.7 Community

The *Homelessness Trail (2001)* recommends to "*Have a strong Aboriginal voice on decision-making committees at all levels to ensure the Aboriginal community receives its share of funding, programs and services*".

To accomplish this recommendation, we must learn to work better with other organizations or institutions, and they in turn, must learn to work better with us. There have been significant challenges for the Aboriginal community to access the mainstream SCPI funding. Key informant interviews cited that the limited strategies to publicize the availability of funds and limited time frames around the call for proposal were key factors in the difficulties accessing funds. We

have also had difficulties maintaining consistent representation on the Community Advisory Board on Homelessness (CAB), which makes the funding decisions related to SCPI.

But there has been progress made: the Aboriginal community has consistent representation on the CAB. We are better aware of the RFP process. The new Native Women's Centre and the Aboriginal Health Centre's projects related to Fetal Alcohol Syndrome have directly benefited from the decisions of CAB. The struggle continues for representation at various other levels. We continue our struggle for a HEDAC seat on the Aboriginal Labour Force Development Circle (the decision making body for Aboriginal homelessness dollars). These 'strands' too, must be strengthened.

RECOMMENDATION Y: To ensure that there is a strong Aboriginal voice on all committees and/or bodies addressing homelessness within the City of Hamilton. For example, the membership of the Community Advisory Board on Homelessness currently guarantees Aboriginal representation, and this should continue. Further, that Aboriginal Cultural Awareness Training should be provided to such entities. This training should involve a better understanding and acknowledge the history and unique conditions of Aboriginal homelessness, and result in an increased ability for the mainstream and Aboriginal community to work together around issues of homelessness.

7.7.1 Community Control

Funders related to homelessness and other related issues should work with the Aboriginal community and structures, particularly HEDAC, to develop the capacity of the urban Aboriginal community. Community control within the Aboriginal community of Hamilton has been a longstanding issue. This autonomy is needed in order to better identify, design and implement innovative, community-based responses to Aboriginal homelessness.

The Federal Court of Canada, in a case that began in Hamilton, acknowledged that community control was a key factor in addressing Aboriginal social issues. The Federal Court said that there must be "*community control over labour training programs to the applicants' communities. These communities can, through representative organizations accountable and responsible to the community members, design, implement and fund training programs which will meet the needs of the Aboriginal community where the applicants reside*" (Federal Court of Canada, 2001).

7.8 Provincial & Federal

7.8.1 Aboriginal Involvement with Corrections

Aboriginal people also cross both the Provincial and Federal governments in their disproportionate representation in the criminal justice system as the table below demonstrates. Increased risks of homelessness has been identified for those being discharged from the system, as people often are without a source of income, and with the regionalization of jails, people often find themselves in a different community and disconnected from any networks and supports.

Table 7: Aboriginal People and Criminal Justice System

Aboriginal People and Criminal Justice System Based on 1999 General Social Survey – total sample = 26,000		
Aboriginal	**Non-Aboriginal**	**Criminal Justice System**
35%	26%	Victim of at least one crime in previous 12 months.
19%	10%	Victim more than once, in previous 12 months.
307/1000	110/1000	Victim of violent crime (sexual assault, assault or robbery); almost 3 times greater.
20%	7%	Victim of spousal violence.
More Likely to Have Contact With Police		
17%	13%	As victims of crime.
11%	6%	As witness to crime.
4%	1%	Being arrested.
20%	15%	Access courts positively (i.e. helping victim)
58%	67%	Police easy to talk to.
48%	61%	Police enforcing laws.

Source: Statistics Canada, 2001

7.8.2 Urban Native Housing

The unique Aboriginal specific services offered by Urban Native Homes and Sacajawea Non-Profit Housing within Hamilton, has resulted in coordinated access to services which aids tenants in their goal of obtaining and maintaining their housing and preventing further homelessness. Progress has been made through the enhancement of programs and services provided by the UAS-H strategy (a tenant survey and handbook, access to utilities grants, and a self-empowerment program supplying warm clothing, food vouchers, over the counter drugs and bus tickets; while providing information on available resources within Hamilton). Challenges still exist with the ever present need for additional housing units, with particularly identified needs for one bedroom units to address the needs of youth and of our elders. On December 4, 2002, the HEDAC had its' inaugural resolution in support, (see below) acknowledgement and recognition of the Urban Native Housing Program being a fiduciary responsibility of the Federal government instead de-volving that responsibility to the province. This resolution will be presented to the Hamilton City Council.

Hamilton Executive Directors' Aboriginal Coalition **Resolution #1**

THE NEED FOR ALL LEVELS OF GOVERNMENT
TO RECONGNIZE THE UNIQUENESS OF
THE URBAN NATIVE HOUSING PROGRAM

WHEREAS the government of Canada, through its agent, Canada Mortgage and Housing Corporation (CMHC), is accountable and responsible for the Urban Native Housing Program; and
WHEREAS the Government of Canada has agreed to devolve its fiduciary and administrative responsibility for the Urban Native Housing Program to the Provincial Government level; and
WHEREAS the Government of Ontario has decided to devolve its Federal funding and administration responsibility for the Urban Native Housing Program to the Municipal Government level; and
WHEREAS the Urban Native Housing Program is considered to be a unique housing program that offers low income housing and support to Aboriginal families and seniors who encounter culturally sensitive housing issues in the Urban setting; and
WHEREAS the Government of Canada has a constitutional, fiduciary and political responsibility for all matters relating to its Aboriginal Peoples;
WHEREAS ALL levels of Government must acknowledge and respect the autonomy of the Urban Native Housing Program;
THEREFORE BE IT RESOLVED THAT we, the Hamilton Executive Directors' Aboriginal Coalition, recognizes that the Government of Canada has the full responsibility and jurisdiction for the Urban Native Housing Program; and
FURTHER BE IT RESOLVED THAT we hereby notify the Government of Canada and the Province of Ontario that the devolution of the Urban Native Housing Program is threatening its long-term financial viability; and
FINALLY BE IT RESOLVED THAT the position of the Hamilton Executive Directors' Aboriginal Coalition is that the Urban Native Housing Program must remain a separate and unique Federal Urban Aboriginal Housing Program, and that the autonomy of the program is respected as such, and that the operations of the Program must remain financially viable and the Federal Government has the sole responsibility to administer the Program.

CARRIED UNANIMOUSLY

7.8.3 The Canadian Federal Indian Act

The Canadian Federal Indian Act of 1876 is a complex piece of legislation with the main purpose of controlling and regulating the lives of all Indians, and has contributed to the current homelessness crisis among Aboriginal people in Hamilton. Long and Dickason (1996) define the goals of the Indian Act as follows:

(1) 'To destroy the cultural bases of Aboriginal society';
(2) 'To transform Aboriginal peoples through exposure to Christianity and arts of civilization';
(3) 'To assimilate (absorb) them into society as self-reliant and productive citizens'.

The passage of Bill C-31 in 1985 repealed the parts of the old Indian Act that had undermined the matrilineal society of Aboriginal people. Under the old Indian Act, a status Indian man who married a non-Indian woman conferred his status onto her and their offspring. A status Indian woman who married a non-Indian man not only lost her status, but was often kicked off her reserve for no longer being "Indian". The result of the old Indian Act was to impose and create a patriarchal system on a society that was matrilineal. One outcome of these changes is that

among Aboriginal peoples, the rates of domestic violence (and the often resulting homelessness among women) are among the highest in Canada.

7.9 Progress Addressing Homelessness in the Aboriginal Community

We are also starting to see changes for the positive; and there has been progress addressing homelessness in the Aboriginal community.

The voice of the Aboriginal community, through HEDAC, is now organized and recognized in the City of Hamilton. The UAS-H funding related to homelessness has played a key role in strengthening HEDAC – and in bringing attention to Aboriginal issues and homelessness specifically. The UAS-H funding has also established capacity for Aboriginal community control over funds to respond to Aboriginal homelessness, and to do long-term planning related to homelessness. In short, there was value and benefit to having a separate, Aboriginal controlled stream of homelessness funding.

There have been new projects to prevent homelessness and respond to emergency needs. The Urban Aboriginal Strategy funded 12 different projects, which have focused on providing emergency supports to people experiencing homelessness, preventing greater homelessness, and doing public education related to homelessness. There have been 3 Aboriginal projects funded through the SCPI dollars: an early intervention project to address Fetal Alcohol Syndrome Effects among Aboriginal Youth, partial funding for a new Native Women's Centre and an emergency intervention project to provide emergency supports to prevent homelessness.

RECOMMENDATION Z: The Urban Aboriginal Strategy – Homelessness funding should be increased and made permanent.

There have been new partnerships formed between the Aboriginal and mainstream communities. The partnership between De dwa da dehs nye>s and the Living Rock drop-in to provide a breakfast program, the partnership between the Hamilton Regional Indian Centre and the Social Planning and Research Council to develop this report, and the participation of Aboriginal community members on various committees related to homelessness, including the Community Advisory Board on Homelessness.

The development of Strengthening Hamilton's Community Initiative is also progress. Beginning to address at a systemic level, the racism and discrimination that many communities, including Aboriginal communities face, is an important step to reduce homelessness.

Once again we re-iterate, that it is our sincerest hope, that the opportunity presented by having an Aboriginal Section within *the 2003 Report Card on Homelessness in Hamilton*, will aid in the understanding of the need for recognition and acknowledgement of the diversity of racial backgrounds, or for that matter, the different people within Hamilton; resulting in end result of progress towards equality. We give thanks and acknowledge the opportunity for public awareness in the spirit of understanding and acknowledging the history, and unique conditions of Aboriginal homelessness, and of the Hamilton Aboriginal community at large. Nia:wen Kowa Akwe:kon (Thanks very much, everyone).

8.0 CONCLUSIONS AND SUMMARY OF RECOMMENDATIONS

This *Progress Report* has identified areas of progress and outlined the challenges facing this community and its response to homelessness, poverty, and housing. It has also provided information about marginalized and disadvantaged groups and the barriers that are faced in accessing services and funding. Finally, it has reviewed the circumstances, history, and progress surrounding Aboriginal homelessness in Hamilton.

Progress was most apparent in the area of emergency services, services to prevent homelessness, community planning and research, and the supply of transitional housing, where the impacts of the SCPI and Urban Aboriginal Strategy – Homelessness funding were reflected. Emergency shelters for men, women, families, and youth have been renovated, expanded, and built. Case management staff have been added. There have been over 60 new projects related to homelessness – many of them preventing greater homelessness in Hamilton. While the continuation of these projects is largely dependent on future SCPI funding (and some have had to scale back significantly or close), their impact in the last two years is certainly notable. There has been substantial research and community planning done on the issue of homelessness in the last few years. The increased knowledge will contribute when assessing the community's priorities over the next several years.

The supply of transitional housing also showed progress with the YMCA's renovations contributing to a substantial increase in the number of rooms available for men. Transitional housing for women leaving abusive relationships also showed some progress by both stabilizing funding over the long term, and increasing the number of spaces available.

There have been new partnerships formed to deliver services, and new committees formed to identify and work toward specific solutions for youth and Aboriginal people. There are a growing number of community-based initiatives to address poverty, address food security, and create affordable housing. The increasing networks, coalitions, and partnerships represent a key resource in the community's efforts to reduce and end homelessness. The Aboriginal community has come together and done a considerable amount of planning and taken action to address homelessness. The ability of the community to creatively identify and implement the range of services has had significant impacts on people at risk of homelessness.

In spite of this progress, there continue to be considerable challenges:

Many people affected by homelessness are members of disadvantaged groups in our community, including recent immigrants, refugees, racially visible people, Aboriginal people, women, people who are gay, lesbian, bisexual, and people with mental and physical disabilities. Most of these groups experience higher than average poverty rates and decreased access to housing and services due to racism, sexism, homophobia, ableism and other forms of oppression. As a result, many are at higher risk of homelessness. Certain specific barriers identified in our research included an inadequate supply of housing that is affordable and accessible for people with physical disabilities. Racially visible people, immigrants and refugees have decreased access to mainstream services like food banks, emergency shelters, and health care because of lack of

language and cultural interpretation, a lack of knowledge of mainstream services, cultural insensitivity and experiences of racism, and inadequate staff training. All people who identified as lesbian, gay, or bisexual in the community consultation reported incidences of discrimination in the context of housing or service provision. Local agencies need to take increased action to identify and reduce barriers that exist, and funders have a unique opportunity to encourage action in this regard.

Poverty is increasing in Hamilton. Local efforts to reduce poverty are advocating for change, and must be complemented by policy initiatives from senior levels of government. The most effective tools for poverty relief lie with Provincial and Federal governments. Barriers to employment must be identified and addressed (including foreign licensing requirements and requirements for "Canadian experience"). Social assistance rates, both Ontario Works and ODSP, and the minimum wage are inadequate and are placing people at risk of homelessness.

The lack of affordable housing options in Hamilton is creating significant homelessness. Transitional housing is in high demand by recent immigrants, refugees, youth, women leaving abusive relationships, and seniors, in spite of the increases in supply. The recent reductions to subsidies for people living in residential care facilities have created significant risk of homelessness for an already vulnerable group of people. While supported and supportive housing remains a highly effective model of housing for people with a long history of homelessness and severe mental illness, there are relatively few new units in Hamilton. The waiting list for subsidized housing continues to grow and there have been no new units added in response.

The rental market in Hamilton continues to be very competitive, with low vacancy rates and rising rents. Additionally, relying on the private market to create affordable rental housing has not resulted in new affordable units. Many people identified the quality of rental housing that was available was inadequate and unsafe. People are also being denied access to housing because of illegal discrimination based on source of income, age, ability level, racial status, and family status. While there have been some creative efforts in the community to address these issues, the power to increase the supply of housing sits with governments – local, Provincial, and Federal, and they have been largely unresponsive to the housing needs of this community.

The crisis of homelessness can be solved. It is not unavoidable or inevitable. The recommendations in the *Community Action Plan*, the *Homelessness Trail*, and the *Report Card on Homelessness* point out where community priorities must lie. The recommendations in this *Progress Report*, as well as the challenges which are identified, give an indication of where additional emphasis must be.

In order to end homelessness, urgent action is necessary from each level of government. The municipal government must continue to play a leadership role in planning, administering, delivering, and sharing the costs of programs related to homelessness. The local government must identify homelessness as a priority and allocate resources accordingly. The local government must act on its commitment to the flagship initiative of affordable housing in the Social Vision. Provincial and Federal governments must take responsibility for adequately funding the range of community-based solutions that are required to end the present crisis. The SCPI funding that has been provided to strengthen services for people experiencing or at-risk of homelessness is one vital

piece of addressing homelessness, but must be accompanied by long term policy initiatives to address poverty, create affordable housing, provide adequate supports for people to maintain housing, reduce violence and reduce racism and other forms of oppression.

Our research also indicates that while a significant amount of homelessness can be solved using these policy responses, the issue of homelessness is substantively different in the Aboriginal community. Understanding and acknowledging this history is a first step in addressing Aboriginal homelessness. The second step involves adequately supporting the efforts of the Aboriginal community to take action on the issues of homelessness. These actions have been laid out in planning documents *The Homelessness Trail: Voice of our People*, and the McMaster/HEDAC Evaluation and require support from the entire community. Long term solutions to Aboriginal homelessness must be involve distinct strategies and be Aboriginal driven, conceived, and delivered.

8.1 Summary of Recommendations

The Recommendations are organized for readability and do not reflect prioritization.

8.1.1 Services

The *Community Action Plan* on Homelessness and *Report Card on Homelessness* identified that a continuum of supports would reduce service gaps and enable a strong, community response to homelessness. The *Report Card on Homelessness* and this *Progress Report* on Homelessness found that there has been progress made in services related to homelessness and that the SCPI funding played an important role in that progress. This progress could be expanded with increased permanent funding related to homelessness from all levels of government. This increased funding should also take into account the changing demographics of people who are experiencing homelessness and respond accordingly. Funding related to homelessness needs be accessible to all groups in the community, and should include specialized methods to reach Aboriginal and racially visible communities.

RECOMMENDATION C: The Federal government should increase and make permanent SCPI funding.

RECOMMENDATION D: Provincial and Municipal governments should increase and make permanent funding related to homelessness.

RECOMMENDATION E: The Community Action Plan recommendation regarding a systemic barriers needs assessment regarding emergency shelters and drop-ins should be implemented to identify people who are experiencing absolute homelessness, but are not accessing emergency shelters. This needs assessment should include people who have experienced barriers, experts in access and equity, and service providers.

RECOMMENDATION A: A lead organization should be identified and funded to facilitate a community-wide strategy for improving routine data collection about homelessness in Hamilton. These changes should increase the amount and utility of that information without

unduly burdening front-line workers. This should be done in consultation with experts on access and equity, experts in information technology, the Aboriginal community, other racially visible communities, the women's services community, people who are lesbian, gay, bisexual, or transgender, and people with disabilities. This information should contribute to the ongoing monitoring of the homelessness crisis in Hamilton.

RECOMMENDATION B: The Community Action Plan should be updated annually and should be used to coordinate the community effort to end the crisis of homelessness. Resources should be allocated to support the annual update and monitoring of the Plan, as well as to facilitate action on recommendations in the Plan.

RECOMMENDATION F: There needs to be increased resources to facilitate access to health care and health programs for people experiencing homelessness as well as facilitating improvement of the coordination and delivery of those programs.

RECOMMENDATION G: There is a need for increased research on inner city health issues and the social determinants of health, particularly related to homelessness in Hamilton. This research should have a focus on specific methods to help people who are experiencing absolute homelessness move into stable housing.

8.1.2 Access and Equity

The *Community Action Plan on Homelessness*, the Report Card on Homelessness, the Homelessness Trail, and the research conducted for this *Progress Report* found that racism, sexism, able-ism, homophobia, and other forms of oppression continue to result in higher rates of poverty, decreased access to housing, and difficulty accessing services. These factors place some groups in the community at higher risk of homelessness.

RECOMMENDATION H: All groups and organizations with mandates connected to homelessness and/or poverty, which provide services to the whole community should develop systemic anti-racism and anti-oppression organizational development initiatives including policies, implementation plans, practices, training and strategies for cultural interpretation. This should be done in consultation with experts in access and equity, and members of racially visible communities. These initiatives should be tied to outcomes in both individual performance and organizational performance.

RECOMMENDATION I: All new programs and services in Hamilton should be developed in a way that involves racially visible community participation.

RECOMMENDATION J: Both governmental and non-governmental funders who fund work related to homelessness, poverty, and housing in the City of Hamilton should require anti-racism and anti-oppression organizational development initiatives for homelessness-related organizations serving all people.

RECOMMENDATION K: Funding related to homelessness and poverty should use an inclusive process to create access to funding which is equitable for Aboriginal, racially visible communities, and other marginalized groups.

RECOMMENDATION L: Stable, core funding should be provided for a new, independent organization grounded in racially visible communities, staffed by people with experience of anti-racism change work, and devoted not to service provision itself, but to be a resource for facilitating systemic anti-racism and anti-oppression change and community level advocacy, in the context of groups and organizations related to homelessness and poverty. Possible funding sources and an implementation plan could be explored in partnership with Strengthening Hamilton's Community Initiative.

RECOMMENDATION M: Further research needs to be funded and done in the Hamilton community around the experiences of lesbian, gay, bisexual, and transgender people in terms of access to income, housing, and services related to homelessness and poverty.

RECOMMENDATION N: All organizations whose activities are related to homelessness and poverty should develop systematic plans for making their activities/services accessible to people who identify as lesbian, gay, bisexual, or transgender.

8.1.3 Addressing Poverty

The *Community Action Plan on Homelessness*, the *Homelessness Trail*, and the *Report Card on Homelessness* all made recommendations to reduce the poverty which underlies much of the homelessness in the community. This *Progress Report* found that there has been limited progress addressing poverty in Hamilton, and that community initiatives to address poverty must be accompanied by policy initiatives from senior levels of government.

RECOMMENDATION P: The Province of Ontario should increase minimum wage and social assistance rates to cover the basic costs of living. This should include indexing the shelter portion of social assistance to average rents, and reducing barriers to accessing benefits.

RECOMMENDATION O: All levels of government, licensing bodies, employers and community organizations should identify and eliminate the barriers that exist related to foreign licensing and requirements for "Canadian" experience.

8.1.4 Affordable Housing

The *Community Action Plan on Homelessness*, the *Homelessness Trail*, and the *Report Card on Homelessness* all identified the lack of affordable housing options as a major contributing factor to the growing crisis of homelessness. This *Progress Report* found that there continues to be a lack of safe, affordable housing in Hamilton, and that active participation by all levels of government is necessary to create an adequate range of affordable housing options.

RECOMMENDATION T: ***The Federal government should expand its Federal/Provincial Housing Agreement to increase the amount of affordable housing that will be produced. As well, the housing that is produced should be affordable for people living at or below the poverty line. As one example, the Federation of Canadian Municipalities (1999) developed an affordable housing strategy which would reduce homelessness. The recommendations in that report should be implemented.***

RECOMMENDATION S: ***The Provincial government should develop a Provincial Housing Strategy which would increase the supply of affordable, supported, and transitional housing options in Hamilton. In addition to responding to emerging needs, the supports should specifically address: people with a history of homelessness, men and women with severe mental illness, youth, seniors, and people with addictions. The Provincial Housing Strategy should also include new, matching funds for the Federal/Provincial Housing Agreement.***

RECOMMENDATION Q: ***The City of Hamilton, in its "Keys to the Home" housing plan, should prioritize the development of housing that will be affordable to people with incomes below the poverty line, people on social assistance, and people at risk of homelessness.***

RECOMMENDATION U: ***The City of Hamilton's Building and Licensing Department should develop a method to monitor the quality of housing in Hamilton and to enforce basic standards. Reports should be made publicly available summarizing the findings of these methods.***

RECOMMENDATION V: ***Local funders, in partnership with all levels of government, should allocate money to do advocacy work specifically in the area of discrimination and housing. This could include exploring the opening of a Hamilton branch office of the Centre for Equality Rights in Accommodation, a Toronto-based organization that deals with both casework and policy advocacy around discrimination and housing.***

RECOMMENDATION R: ***The supply of transitional housing for people at risk of, or experiencing homelessness should be expanded, particularly for recent immigrants, refugees and women leaving abusive relationships.***

8.1.5 Aboriginal Issues

The Homelessness Trail: Voice of Our People identified a plan for addressing and reducing Aboriginal homelessness in Hamilton. This report found that there had been some progress made both in terms of new programs, partnerships, and community planning. The community control over funding provided by the Urban Aboriginal Strategy funding was beneficial and contributed to capacity building. Additional resources are needed to strengthen and build on that progress, and implement the recommendations made in the Homelessness Trail.

RECOMMENDATION Z: ***The Urban Aboriginal Strategy - Homelessness funding should be increased and made permanent.***

Recommendation X: That funding be identified and allocated to support community development and community-specific efforts to address homelessness. As an example, funding for administrative support of the HEDAC to further the unified efforts of the Hamilton Aboriginal community to address homelessness should be provided.

RECOMMENDATION W: Funding allocations should take into account and respond to the changing demographics of who is homeless in Hamilton. For example, as Aboriginal homelessness has been conservatively estimated at 20% (compared with 2% of the overall population of Hamilton) then it could ensue that every one out of five dollars should be targeted to address Aboriginal homelessness.

RECOMMENDATION Y: To ensure that there is a strong Aboriginal voice on all committees and/or bodies addressing homelessness within the City of Hamilton. For example, the membership of the Community Advisory Board on Homelessness currently guarantees Aboriginal representation, and this should continue. Further, that Aboriginal Cultural Awareness Training should be provided to such entities. This training should involve a better understanding and acknowledge the history and unique conditions of Aboriginal homelessness, and result in an increased ability for the mainstream and Aboriginal community to work together around issues of homelessness.

References

Battle, Ken (1996). *Precarious labour market fuels rising poverty.* Ottawa: Caledon Institute of Social Policy.

Bishop, A (2002). *Becoming an ally: Breaking the cycle of oppression in people, second edition.* Halifax: Fernwood Publishing, 2002.

Brant, B (Ed.) (1988). *A Gathering of Spirit - A Collection by North American Indian Women.* The Women's Press, Toronto.

Centre for Addiction and Mental Health. *Guide to the Centre for Addiction and Mental Health.* Toronto: Centre for Addiction and Mental Health, 2003.
Available at: http://www.camh.net/guide/addiction/treatment_prog_special_pop.html>.

Churchill, W (1998). *A Little Matter of Genocide - Holocaust and Denial in the Americas, 1492 to the Present,* Arbeiter Ring Publishing, Winnipeg.

Community Action - Canada's Community Service Reporter, "Canada's first Aboriginal urban child protection service opens in Vancouver", Sept. 16, 2002.

Drost, C. & Schwindt (1995) *Market Solutions for Native Poverty - Social Policy for the Third Solitude,* Toronto: C.D. Howe Institute.

Dunn, P. (2001). *A Comparison of SCPI Cities.* City of Hamilton: Hamilton.

Fazari, Lori. "Police hold Muslim forum; Ask how they can serve minorities better." Hamilton Spectator, p. A13, February 8, 2003.

Feightner, K, Wong, K., & Kowalski. W. (1999). *The Urbanization of Poverty in Hamilton Wentworth.* City of Hamilton: Hamilton.

Freeman, Bonnie (2003), *McMaster Evaluation.* Unpublished. Indigenous Studies: McMaster University.

Galabuzi, G. (2001). *Canada's Creeping Economic Apartheid.* Toronto: The CSJ Foundation for Research and Education.

HR Matters: Hamilton Human Resource Strategy Study (Executive Summary). Hamilton: Economics Consulting, 2002.

Hafner, S. (2003). *Homelessness in Hamilton: Busting the Myths.* Housing Help Centre: Hamilton.

Hall, S. (2002). *A Focused Report on the Needs of Seniors at Risk of Abuse.* Council Against Abuse of Older Persons: Hamilton.

Hamilton District Health Council (2001). *Background Report: Housing and Support Requirements for Persons with Serious Mental Illness.* Hamilton District Health Council: Hamilton.

Hamilton Executive Directors' Aboriginal Coalition, (2001). *The Homelessness Trail: "The Voice of the People,* Introductory Report on Aboriginal Homelessness within the New City of Hamilton: Native Home Providers of Ontario.

Hamilton Foodshare (2002). *Hunger Count 2002.* Hamilton.

Hanvy, L, and Kunz, J. (2000). *Immigrant youth in Canada.* Ottawa: Canadian Council on Social Development.

Housing Help Centre (2002). *Vacant Rental Market Survey 2002.* Hamilton.

Hulchanski, D. (2002). *Housing Policy for Tomorrow's Cities.* Canadian Policy Research Network: Ottawa.

Hulchanski, D. (1997). *The Homeless: Questions and Answers.* Raising the Roof: Toronto.

Jackson, A (2003). "Living wage repays society in the end." *National Post.* April 7, 2003.

Jaffray, D. (2003). *Report on Hamilton Seniors: Trends and Issues.* Social Planning and Research Council of Hamilton.

Kivel, P. (2002). *Uprooting racism: How white people can work for racial justice, revised edition.* Vancouver: New Society Publishers, 2002.

Kunz, J., Milan, A. & Schetagne, S. (2000). *Unequal access: A Canadian profile of racial differences in education, employment and income.* A report prepared for Canadian Race Relations Foundation by the Canadian Council on Social Development.

Long, D., and Dickason, O, (1996) *Visions of the Heart - Canadian Aboriginal Issues,* Harcourt Brace & Company Canada, Ltd: Toronto.

Martin, B & Trudeau, M, (2003) *Hamilton Aboriginal Youth Barriers,* OFIFC-GREAT Initiative, Hamilton Regional Indian Centre.

Martin-Hill, D. (1996), *Lecture Sept. 23/96 a* McMaster University, Indigenous Studies,.

Mayor's Homelessness Action Task Force (1999). *Taking Responsibility for Homelessness: An Action Plan for Toronto.* Toronto: City of Toronto.

McKenzie, K.. "Racism and health". *British Medical Journal,* 326:65-66, January 11, 2003.

McKibbon, G. (2001). *Emergency Shelter Gaps Analysis.* City of Hamilton.

Miles, R. (1989). *Racism* . London: Routledge.

Moncrief, K. (2001). *What are Effective Strategies in the Prevention of Homelessness?* City of Hamilton: Hamilton.

The Monitor (2003). Ottawa: Citizenship and Immigration Canada

Neigh, S. (2002a). *An Assessment of Housing Need Amongst People with Disabilities in Hamilton: Building Toward Freedom House.* Social Planning and Research Council of Hamilton.

Neigh, S. (2002b). *Trends in Poverty and Homelessness in Hamilton.* Social Planning and Research Council.

Neigh, S. (2003). *Consulting the Community Around Housing and Homelessness: Structured Notes and Themes.* Social Planning and Research Council of Hamilton: Hamilton.

Ornstein, M. (2000). *Ethno-Racial Inequality in the City of Toronto: An Analysis of the 1996 Census.* Toronto: City of Toronto.

Report of the Commission on Systemic Racism in the Ontario Criminal Justice System. Toronto: Queen's Printer for Ontario.

Report of the Royal Commission on Aboriginal Peoples - vol. 1 &2 (1996). *Looking Forward, Looking Back & Restructuring the Relationship*, Ottawa: Canada Communication Group Pub.

Schellenberg, Grant (1997). *The changing nature of part-time work.* Ottawa: Canadian Council on Social Development, 1997.

Shapcott, M. (2003). *State of the Crisis 2003: Ontario housing policies are de-housing Canadians.* Canadian Centre for Policy Alternatives: Ottawa.

Smith, C. (2003). *Hamilton at the crossroads: Anti-racism and the future of the city.* Hamilton: Strengthening Hamilton's Community Inititative, 2003.

"Star analysis of police crime data shows justice is different for blacks and whites." Toronto Star, p. A01, October 19, 2002.

Statistics Canada (2002), *The Health of the Off-reserve Aboriginal Population*, Cat. #82-003, Supplement to Health Reports, volume 13, 2002

Statistics Canada. (2003). *Community Profiles: Hamilton.* Ottawa: Statistics Canada. Search from <http://www12.statcan.ca/english/profil01/PlaceSearchForm1.cfm>.

Stepan, Cheryl. "Fear remains in Muslim community." Hamilton Spectator, p. A7, April 12, 2002.

Stevenato & Associates (2003), *Stay In School Initiative for Aboriginal Youth*, draft report for the Hamilton Executive Directors' Aboriginal Coalition & The Hamilton Community Foundation.

Todd, S., and Brown, S. (1999). *Our Homes and Our Streets: Homelessness in Hamilton.* Social Planning and Research Council of Hamilton.

Trocmé, N., George, U., Maiter, S. (2000) *Building bridges: The collaborative development of culturally appropriate definitions of child abuse and neglect for the South Asian community.* Toronto: Centre of Excellence for Child Welfare.

"Verdict of the Coroner's Jury into the death of Kimberley Ann Rogers" 2002. Available at: http://dawn.thot.net/Kimberly_Rogers/kria118.html.

Vidal, C. (1997) *HIV/AIDS and Aboriginal Community, Impact of HIVAIDS on Native Populations*, Available at: www.niichro.com/aids/aids3.html

Wingard, J. (2002). *Trends in Homelessness in Hamilton.* Social Planning and Research Council of Hamilton.

Working Group on Racial Equity (2000). *Unfurling the flag: A research project on political participation.* Hamilton: Working Group on Racial Equity.

Working Group on Racial Equity (2001). "Hamilton set to lead way on diversity." *Hamilton Spectator*, April 20.

Yalnizyan, A. (1998) *The growing gap: A report on growing inequality between rich and poor in Canada.* Toronto: Centre for Social Justice, 1998.

Glossary

Ableism - The policies, procedures, practices and acts that tend to result in people with disabilities having unfairly negative experiences and outcomes, whether intended or not.

Absolute homelessness - This applies to situations in which people who lack safe, adequate, and affordable housing use coping strategies that tend to be visible, such as staying on the street or in emergency shelters.

Access - A service, program, housing, or activity is accessible if a person is able to use it to achieve his or her desired outcomes. Important factors determining accessibility include knowledge about availability, ease and comfort of use and the achievement of the desired results. This term is often used in combination with the term "equity" which means including strategies to include marginalized and disadvantaged groups.

Affordability - Housing that is 30% or less of a household budget for all people in the community.

Ageism - The policies, procedures, practices and acts that tend to result in youth and seniors having unfairly negative experiences and outcomes, whether intended or not.

Double cohort - Because of the decision by the Province of Ontario to change high school graduation requirements, all across the province the number of students that would normally graduate in two years will actually be graduating in a single year, 2003. This will result in pressures on Ontario's universities, and on the student housing resources connected to them.

Emergency shelter - A service provided by community-based agencies that provides emergency shelter for individuals experiencing absolute homelessness.

Heterosexism -- The policies, procedures, practices and acts that tend to result in lesbian, gay, bisexual, and transgender people having unfairly negative experiences and outcomes, whether intended or not. Also the cultural/institutional assumption that everybody is straight.

Hidden homelessness - This applies to situations in which people who lack safe, adequate and affordable housing use coping strategies that are invisible, such as sleeping on the couch of a friend or relative. This is a very difficult population to research.

Homelessness - Lacking safe, adequate and affordable housing. This includes absolute homelessness, hidden homelessness and relative homelessness, which are also defined in this glossary.

Homophobia - Hatred negative acts directed towards people who identify as lesbian, gay, bisexual, or transgender.

Low Income Cut Off (LICO) - A threshold to define poverty calculated by adding 20 percentage points to the percentage of income spent by an average equivalent household on food, clothing and shelter, taking family size and community size into account.

Low Income Measure (LIM) -- A threshold to define poverty calculated as being one-half the median income of an equivalent household.

Mainstream - In the context of this report, this term refers to those organizations which express a desire to be universal in terms of participation in their activities and use of their services, but which remain a part of the established power structure of the community. In particular, it refers to organizations which claim to be universal but are largely run and governed by white Canadian staff, volunteers, clients, and perspectives.

Poverty - In general, the experience of living with a low level of income. Except where specified otherwise in the text, generally "poverty" as it is used in this document includes people whose income falls below the Statistics Canada Low Income Cut Off.

Racism - The policies, procedures, practices and acts that tend to result in racially visible people and communities having unfairly negative experiences and outcomes, whether intended or not.

Relative homelessness - Historically, the Canada Mortgage and Housing Corporation has advised that people spending more than 30% of their income on rent are at increased risk of homelessness. As the housing crisis has deepened, the term "relative homelessness" has come to be used for people spending more than 50% of their gross income on rent or who are living in unsuitable or unsafe conditions.

Rent-geared-to-income (RGI) housing - Housing in which the rent is set at 30% of the income of the resident. Also known as subsidized housing.

Residential care facilities - Privately run facilities that provide a wide variety of supports to people living in them, regulated by the municipality. Also called Second Level Lodging Homes.

Sexism - The policies, procedures, practices and acts that tend to result in women having unfairly negative experiences and outcomes, whether intended or not.

Subsidized housing - Housing in which the rent is set at 30% of the income of the resident. Also known as rent-geared-to-income (or RGI) housing.

Supported/Supportive housing - Supported housing and supportive housing are broad categories that include various living arrangements in which people receive health and living supports that allow them to live independently.

Supporting Communities Partnership Initiative (SCPI) - A three-year, Government of Canada funding program supporting programs to address the symptoms of homelessness. The writing of this document was supported by SCPI. As of this writing, a successor to this program has been announced but details are not yet known.

Systemic barriers - What results when policies, practices, organizational culture and ways of doing things result in a specific group (e.g. racially visible women and men, transgender people,

people with disabilities, etc.) facing difficulties in getting resources, security, wellbeing, and power that people who are not a member of that group do not face.

Transgender people - People whose biological sex at birth differs from the gender with which they identify, and/or whose gender identification goes beyond a rigid, binary male/female system of categorization.

Transitional housing - Medium term housing where stays range from six weeks to a maximum of one year.

APPENDIX A:

Assumptions and Guiding Statements
for the Progress Report on Homelessness 2003
(Approved by the Homelessness Evaluation Committee)

Evaluation Goals and Objectives
for the Progress Report on Homelessness 2003
(Approved by the Homelessness Evaluation Committee)

Assumptions and Guiding Statements for the
for the Progress Report on Homelessness 2003
(Approved by the Homelessness Evaluation Committee)

We acknowledge that...

1) ...systemic discrimination and oppression permeate society, and they impact experience, information, and knowledge. Forms of oppression this evaluation will consider are racism, sexism, heterosexism (including homophobia), ageism (which affects both youth and seniors), ableism (as experienced by people with both physical and mental disabilities), classism, and the oppressions experienced by Aboriginal people, and immigrants and refugees.

2) ...there is intersectionality between and amongst various forms of oppression.

3) ...oppression may be experienced in many different ways at the same time.

4) ...information and knowledge come in many different forms, which will be valued equally in the conduct of this evaluation.

5) ...in carrying out this evaluation we are committed to asking who/what is there and assertively investigating who/what is *not* there, all in a way that incorporates information in a cultural context (values, principles, beliefs, and practices.)

6) ...the social locations of the individuals and organizations doing the research will impact on that research, and must be explicitly recognized.

Evaluation Goals and Objectives for the Progress Report on Homelessness 2003 (Approved by the Homelessness Evaluation Committee)

1. **Goal: To understand and work with the community's capacity in relation to homelessness and affordable housing in Hamilton.**

1.1 Objective: Map the organizations, groups, funders, and where possible, informal groups, in Hamilton who are addressing housing and homelessness including those by and for specific populations, and identify the inclusivity and accessibility of the spaces that are identified.

1.2 Objective: Map the organizations, groups and funders addressing affordable housing in Hamilton, including those by and for specific populations, and identify the inclusivity and accessibility of the spaces that are identified.

1.3 Objective: Ask organizations and groups in the above objectives to identify differences between funded activities, actual activities and needed activities.

1.4 Objective: Include an analysis of partnerships and collaborations in this community to address homelessness, which includes new partnerships and pays attention to patterns of partnerships with reference to inclusion and exclusion.

1.5 Objective: Work with the existing research and evaluation capacity in this community around the issues of homelessness, with a consciousness about the strengths and weaknesses of that information with respect to the Assumptions/Guiding Statements for this evaluation.

1.6 Objective: Treat previous local homelessness planning documents (*Community Action Plan on Homelessness, The Homelessness Trail: Voice of Our People, and the 2002 Report Card on Homelessness, Our Homes: Our Streets, Housing and Support Requirements for People with Severe and Persistant Mental Illness (Oct. 2001)*) as key references and sources.

2. **Goal: To evaluate Hamilton's overall progress addressing homelessness with a particular focus on actions taken, impacts, gaps, and current state of the community and communicate these findings to the community.**

2.1 Objective: Describe actions taken to address homelessness and the impacts of those actions by community groups, organizations, funders, and governments for the time period January 1, 2002 to the point of data collection.

2.2 Objective: Describe the actions taken to address homelessness and the impacts of those actions due the SCPI funding.

2.3 Objective: Include an analysis of differential impacts based on the Assumptions and Guiding Statements.

2.4 Objective: Include questions about gaps in and barriers to services, and who these gaps and barriers most affect, when collecting data.

2.5 Objective: Identify and measure key indicators related to homelessness in Hamilton (as well as broader indicators, e.g. determinants of health), and make comparisons to past data when available.

2.6 Objective: Include in the Report Card a discussion of the root causes of homelessness which integrates the oppressions identified in the Assumptions/Guiding Statements.

2.7 Objective: Include in the Report Card a discussion of key governmental policies which are having an impact on homelessness in Hamilton.

2.8 Objective: Develop a system or mechanism to make evaluative judgments about Hamilton's progress addressing homelessness. The system or mechanism should define "success" and "progress", and should take into consideration:

- the difference between short term emergency responses, prevention, and long term solutions
- degrees of success
- equity of the benefits of the progress.

2.9 Objective: Develop a written communication plan by Nov 1 which identifies target audiences, strategies, and dates.

3. **Goal: To integrate throughout the evaluation the voices of people, groups, and communities who are historically excluded due to racism, sexism, heterosexism (including homophobia), ageism (which affects both youth and seniors), ableism (as experienced by people with both physical and mental disabilities), classism, and the oppressions experienced by Aboriginal people, and immigrants and refugees.**

3.1 Objective: Develop and incorporate a set of Assumptions/Guiding Statements which recognizes pre-existing imbalances of power and privilege and seeks to include experiences that are normally excluded.

3.2 Objective: Seek data to identify barriers in the context of systemic imbalances in power and privilege and use it to make recommendations to address these barriers.

3.3 Objective: Include questions about use of mainstream services by people impacted by the oppressions listed in the Assumptions/Guiding Statements in data collection from mainstream services.

3.4 Objective: Carry out a series of focus groups, key informant interviews and other types of information gathering sessions with people who experience marginalization and give priority to the information gained from these groups.

3.5 Objective: Develop a mechanism to ensure issues of exclusion are addressed throughout the process of this evaluation.

4. **Goal: To incorporate an understanding of the unique conditions and causes of Aboriginal homelessness in Hamilton.**

4.1 Objective: Include HEDAC and other Aboriginal groups in the process of getting input on drafts of the Report Card and give priority to their input with respect to the Aboriginal specific content.

4.2 Objective: Include questions about Aboriginal use of mainstream services in data collection from mainstream services and Aboriginal people in order to identify barriers.

4.3 Objective: Incorporate into the Report card a section discussing the history of homelessness and response to it in the Aboriginal community, including a section about HEDAC and the principles and values by which it works.

4.4 Objective: Develop a plan with HEDAC for working with the expertise around homelessness that exists in the Aboriginal community, and for consulting with members of the Aboriginal community throughout the evaluation process.

4.5 Objective: hold public meetings

4.6 Objective: hire an individual with expertise around homelessness issues from the Aboriginal community to work at the SPRC on the evaluation process.

4.7 Objective: write the Aboriginal specific content (at least) of the Report Card with Aboriginal principles and values in mind

5. **Goal: To ensure people who are experiencing, have experienced, and are at risk of homelessness are involved in all phases of the evaluation.**

5.1 Objective: Have representation on the Evaluation Committee from a minimum of 3 people who have experienced or are at risk of homelessness.

5.2 Objective: Carry out focus groups with people who are experiencing, have experienced and are at risk of homelessness including groups targeted to and run to facilitate safe spaces for people experiencing oppressions as outlined in the Assumptions and Guiding Statements.

5.3 Objective: Develop specific strategies to communicate the process and the results of the Report Card to people who are experiencing, have experienced, and are at-risk of homelessness as a part of the Communication Plan.

APPENDIX B:

Methods for the Progress Report on Homelessness 2003
Homelessness Evaluation Committee 2003

Methods for the Progress Report on Homelessness 2003

In order to achieve the Evaluation Goals and Objectives, five distinct methods of gathering information were used: an organizational survey, a review of SCPI records, key informant interview with community leaders, a survey of emergency shelter use, and secondary analysis of existing data (including program data). In addition, the Progress Report relies on the qualitative information in *Consulting with the Community around Housing and Homelessness* (Neigh, 2003).

Organizational Survey

A survey was developed by the SPRC staff in consultation with the Evaluation Committee (please see Appendix D). The survey gathered information on ongoing homelessness related activities, new activities, partnerships, demographics and systemic barriers.

The survey was mailed to 161 organizations and groups in Hamilton who were identified as working on issues related to homelessness. 83 surveys were returned for a response rate of 52%. The groups were identified in 3 ways: 1) had been surveyed for the previous Report Card; 2) expanding that list from the INFORM New Hamilton Website; 3) a phone survey to faith groups and ethno-cultural organizations to determine if they performed homelessness related activities. The phone survey was carried out in English, and there was a language barrier for some organizations and groups, which resulted in an under-representation of non English speaking groups in this Report Card. In an effort to correct this under-representation, a series of key informant interviews were carried out with community leaders in some ethno-specific groups (the methodology for those interviews is discussed below).

Review of Records for SCPI Projects

Project files of the 60 projects under the Supporting Community Partnerships Initiative were reviewed by SPRC staff in conjunction with the City of Hamilton, Public Health and Community Services. Information gleaned from each file included total budget, project summary, and outcomes or impacts.

Key informant Interview with Community Leaders

In order to gain information about homelessness related activities in particular racial minority groups in Hamilton, key informant interviews were carried out by SPRC staff. Interviews were conducted with the Khmer Association, the Hamilton Chinese Community Resource Centre, the Jamaica Foundation, the Afro-Canadian

Caribbean Association, the Hamilton Sudanese Association, and the Hamilton Muslim Association. The questions for the interview were: 1) what does your organizations or group do? 2) what are the needs in your community (around poverty, around housing) 3) what does "homelessness" mean in your community? 4) how often do you partner with other agencies or organizations around issues of homelessness? 5) do people who need emergency services around housing access mainstream services? What have been some of their experiences? 6) Are you funded, if so, how often do you do funding applications, and how often are you successful? 7) What are some of the systemic gaps faced by people in the ___ community?

While these questions served as a guide, the interviewers had considerable flexibility which allowed the interview to be structured more as a conversation rather than a formal interview.

Survey of Emergency Shelter Use

The template used for this year's survey of Emergency Shelter Use is identical to that used for the Report Card on Homelessness 2002, and the Community Action Plan on Homelessness. The template uses the 3rd Thursday of March, July, and November and asks emergency shelters to report: the number of spaces available, the number of people who slept overnight, number of people who were turned away, and for those who stayed overnight, the gender and whether the person was Aboriginal or not. There is also a space below for additional comments. Surveys were sent to Good Shepherd Men's Services, Women's Services, Notre Dame House, Mission Services Men's Residence, Inasmuch House, Wesley Centre Drop In, Wesley/Living Rock Youth Shelter, Interval House, Native Women's Centre, Out of the Cold, and the YWCA. A survey was received for each agency except the YWCA.

Secondary Analysis of Existing Data

The Progress Report on Homelessness (2003) also relied on existing reports and data. When data came from other reports, these reports are cited and referenced appropriately.

Significant amounts of data were gathered from government departments, community agencies, and community projects through a variety of methods: personal communication, service usage surveys, or special calculations of program data by the authors. In these cases, sources of data will be referenced accordingly.

A word on *Consulting with the Community around Housing and Homelessness: Structured Notes and Themes* (Neigh, 2003).

This Progress Report relies heavily on qualitative information gathered through 25 focus groups and a number of key informant interviews with over 150 people who were experiencing homelessness or at risk of homelessness that the SPRC conducted during the Summer and Fall of 2002.

Detailed information about the methodology can be obtain in the full document which is available on the SPRC website: http://www.sprc.hamilton.on.ca.

APPENDIX C:

RECOMMENDATIONS

Report Card on Homelessness In Hamilton

Social Planning and Research Council of Hamilton, April 2002

RECOMMENDATIONS

Report Card on Homelessness In Hamilton

Social Planning and Research Council of Hamilton, April 2002

1. Tasks in the *Community Action Plan on Homelessness* dealing with issues of poverty and discrimination need to be addressed immediately.

2. Support should be given to the aboriginal community to address the extreme levels of poverty and homelessness among native peoples in Hamilton. (One way of doing this would be to assist the aboriginal community to implement the recommendations of *The Homelessness Trail: The Voice of the People,* a community-based research document that recounts the plight of aboriginal homelessness in our community. See Appendix A.

3. The community should work to provide aboriginal people, new immigrants, refugees, racial minorities and other marginalized populations the supports and opportunities they need to meaningfully participate in community development and decision-making.

4. The opportunities and supports needed to meaningfully participate in the community as volunteers, emergency shelter staff, committee members, and researchers should be available to people with a history of homelessness. (A national report on *Involving Homeless and Formerly Homeless Clients in Projects and Programs to Address Homelessness*, produced by Jim Ward Associates, is in its final stages of preparation. See Appendix E for the recommendations of this report).

5. Local, neighbourhood level solutions to poverty, food security and other issues should be explored and implemented.

6. Immediate work needs to be done to ensure the stability and further the expansion of transitional housing services for women leaving abusive domestic situations.

7. The community should lobby the Federal Government to provide on-going funding for programs and services developed under the SCPI program.

8. The community should lobby, and then work with, the Federal and Provincial Governments to develop long-term national and provincial strategies to deal with poverty and the lack of affordable housing.

APPENDIX D:

The Social Planning and Research Council of Hamilton
2002 - 2003 Homelessness Survey

The Social Planning and Research Council of Hamilton - 2002 - 2003 Homelessness Survey

Section 1: Organizational Basics (Please Print)

Name of organization or group _____

Contact Person:_____

Address:_____

Phone Number:_____ Email address: _____

Organizational Basics Is your organization/group funded (circle one)? Y N

Number of Employees: Total:_____ Homelessness-related:_____

Number of Volunteers: Total:_____ Homelessness-related:_____

Annual Operating Budget: Total:_____ Homelessness-related:_____

Please check the appropriate box below:

	Homelessness is our primary mandate.
	Homelessness is not our primary mandate, however, it is a secondary mandate.
	Homelessness is not in our mandate. (If you check this box, please explain why you do work related to homelessness.)

Please check the type of organization or group you represent:

	Aboriginal Organization (e.g. Hamilton Regional Indian Centre, Urban Native Homes)
	Ethno-specific organizations (e.g. Khmer Community Association)
	Faith Groups (e.g. Hamilton Mosque, Centenary United Church)
	Unfunded Community Groups (e.g. neighbourhood associations, Hamilton Coalition for Social Justice)
	Small, funded mainstream organizations (Annual budget less then $100,000 per year, e.g. Tenant Education Project, The Cottage)
	Mid-sized mainstream non profit organizations (Annual budget more $100,000 to $1,000,000 per year, e.g. Housing Help Centre, McQuesten Legal and Community Services)
	Large mainstream organizations (more than $1,000,000 per year, e.g. Good Shepherd Centre, YMCA, Children's Aid Society)
	Private sector companies
	Labour Unions
	Other:

Ongoing Activities

When we ask about homelessness-related activities we mean any activities that relate to service-provision, self-help or policy advocacy relating to people who are experiencing homelessness or people at risk of homelessness. These activities may include things that are not conventionally thought of as being about homelessness.

What kind of homelessness-related activities does your group or organization engage in? Check all that apply.

☐	Emergency Shelter	☐	Provide Transitional Housing	☐	Policy Advocacy: Aboriginal Related
☐	Emergency Food	☐	Provide Supported Housing	☐	Policy Advocacy: Poverty/Income
☐	Emergency Income	☐	Provide Affordable Housing	☐	Policy Advocacy: Immigration/Settlement
☐	Street Outreach	☐	Discharge Planning	☐	Policy Advocacy: Discrimination
☐	Case Management	☐	Income Support	☐	Policy Advocacy: Housing
☐	Settlement & Integration Services	☐	Life Skills Training	☐	Policy Advocacy: Violence Against Women
☐	Helping People find housing	☐	Employment Skills Training	☐	Anti Racism Training for Staff & Volunteers
☐	Health Care	☐	Self Help or Mutual Aid	☐	Public Education on Homelessness
☐	Emergency Shelter for Women Fleeing Violence	☐	Individual Advocacy	☐	Research and Planning
☐	Internal Anti-Racist Organizational Change	☐	Social and Recreational Activities	☐	Other:

NEW Activities

The Report Card on Homelessness (2002) reported on NEW homelessness-related activities up to December 2001. Please briefly describe any additional NEW homelessness-related activities your organization or group has started or initiated since January 2002?

_____
_____
_____
_____
_____
_____

If you reported any NEW activities, please describe any results or impacts of your NEW activities (e.g. number of people served, policies changed, access to services improved, etc.)

_____
_____
_____
_____
_____

Section 2: Partnerships Around Homelessness Related Activities

The next set of questions probes for specific information on partnership in the community. Please indicate the level of partnership your organization or group engages with each of the potential community partners listed in the table below. (Place a checkmark for each partnership you are involved in.

We have divided partnerships into three levels:

- **Low** (occasional referrals, consultations, informal cooperation or share committee work with)
- **Mid** (formalized partnerships that do not involve day-to-day cooperation, such as trusteeship or participation on an Advisory Committee)
- **High** (day-to-day collaboration in service delivery or other functions).

None	Low	Mid	High	
				Aboriginal Organization (e.g. Hamilton Regional Indian Centre, Urban Native Homes)
				Ethno-specific organizations (e.g. Khmer Community Association, Jamaican Association)
				Faith Groups (e.g. Hamilton Mosque, Centenary United Church)
				Unfunded Community Groups (e.g. neighbourhood associations, Hamilton Coalition for Social Justice)
				Small, funded mainstream organizations (Annual budget less then $100,000 per year, e.g. Tenant Education Project, The Cottage)
				Mid-sized mainstream non profit organizations (Annual budget

				from $100,000 to $1,000,000 per year, e.g. Housing Help Centre, McQuesten Legal and Community Services)
				Large mainstream organizations (more than $1,000,000 per year, e.g. Good Shepherd Centre, YMCA, Wesley Urban Ministries)
				Private sector companies
				Labour Unions

Please place a checkmark beside all the interagency committees related to homelessness which your organization or group participates in:

	Solutions for Housing Action Committee		Woman Abuse Working Group
	Supported Housing Coordination Network		Homelessness Initiative Campaign for Adequate Welfare
	Shelter Working Group		Community Advisory Board on Homelessness
	Residential Care Facility Coalition		Hamilton Executive Directors Aboriginal Coalition
	Street Involved Youth Network		Roomers and Boarders
	Emergency Food Action Committee		Street Outreach Steering Committee
	Housing Trust Fund Working Group		New Food and Shelter Committee
	Ecumenical Support for Refugees Committee		Hamilton Drug and Alcohol Awareness Committee
	Other:		Other:

SECTION 3: Demographics & Systemic Barriers

This is a reminder to encourage candid responses, all responses are confidential. The intent of the Report Card on Homelessness in Hamilton is to evaluate progress addressing homelessness at the community level. It is not to evaluate individual organizations or projects. In reporting the results of the survey, individual organizations may be identified when we report on new activities; however, when reporting on partnerships, gaps, and systemic barriers, we will not identify individual groups and organizations.

Some organizations try to be open to everyone, while others have mandates to serve or work with specific segments of the population. Please identify who your organization is mandated to serve (keeping in mind that it might not be exclusive) by checking off all that apply in the checklist below:

Target Population

	Everyone		Women
	People experiencing absolute homelessness		Men
	Youth		Families
	Seniors		Racial minorities (other than Aboriginal People)
	Lesbian, gay, bisexual, or transgender people		People with Developmental disabilities
	Aboriginal People		People with Physical disabilities
	Immigrants		People with Mental Illness
	Refugees		Other:

Our organization keeps records monitoring usage of your service or participation in your organizations by the following groups (check all that apply.)

	Everyone		Women
	People experiencing absolute homelessness		Men
	Youth		Families
	Seniors		Racial minorities (other than Aboriginal People)
	Lesbian, gay, bisexual, or transgender people		People with Developmental disabilities
	Aboriginal People		People with Physical disabilities
	Immigrants		People with Mental Illness
	Refugees		Other:

Does your organization have an anti-racism, anti-discrimination, and/or anti-harassment policy?

Yes ____ No _____

If yes, please attach a copy.

Please describe the implementation plan, programs, or initiatives that have been a direct result of this policy:

_____

_____

_____

_____

_____

_____

_____

What percentage of the staff in your organization or people in your group has received anti-racism training? Please check one:

___less than 5% ___5-25% ___26-50%

___51-75% ___75-95% ___ 95-100%

Please circle to answer the following YES or NO questions about specific barrier-related issues:

1. Do you provide and/or sponsor child care at all events you organize?	YES	NO
2. Do you regularly arrange for and pay for cultural interpretation services for people who use your service or participate in your organization, as needed?	YES	NO
3. Do organizational publications, advertisements, and other kinds of promotions make the availability of such cultural interpretation services prominent and clear?	YES	NO
4. Do you make written material that you produce available in languages other than French or English?	YES	NO
5. If you are a mainstream organization, do you have data confirming that your employees reflect the racial diversity in the community?	YES	NO
6. If you provide food, at either events or as a matter of basic service, do you provide any food from diets and cultures other than mainstream Canadian?	YES	NO
7. If you work with families, do you allow for flexibility in how people define their own families—for example, inclusion of same-sex partnerships, or inclusion into the basic family unit of relatives that might be considered "extended family" in mainstream Canadian society?	YES	NO
8. Would an employee, volunteer, participant, or client in a wheelchair be able to access all relevant physical spaces in your organization accessed by employees, volunteers, participants, or clients without mobility limitations?	YES	NO
9. Do you always subsidize transportation to events held/planned by your organization/group?	YES	NO
10. Do you require individuals to participate in religious observances in order to receive services or any individual aspect of service from you?	YES	NO
11. Are people who come in to your organization always presented with the option of giving and receiving all information verbally?	YES	NO
12. Do you provide services outside of regular business hours?	YES	NO
13. Do you go to places where potential "clients" or participants would already be, and tell them about your service?	YES	NO
14. In the last year, have you contacted any group or organization specific to Aboriginal people or other racial minorities to tell them about your activities and ask about theirs?	YES	NO
15. In your organization, are particular types of individuals coincidentally "clustered" in particular roles or jobs? (E.g. All staff are women in an organization where that is not explicitly mandated, secretaries are lower economic class, janitors are non-white, etc.)	YES	NO
16. Are your employees unionized?	YES	NO
17. Is your organization's hiring process explicitly based on a model such as Employment Equity or the United Way Bias Free Hiring Policy?	YES	NO

18. Do you extend employment benefits to same-sex partners of employees?	YES	NO
19. Do you proactively provide employees and volunteers with resources (books, magazines, or training opportunities) that they could use to develop higher comfort levels and familiarity with any particular culture?	YES	NO
20. Do you involve racial minority communities in the planning and development of new programs?	YES	NO

In the past year, have you engaged in other **specific, targeted activities** to reduce barriers or encourage participation in your organization for any of the following groups? If yes, please briefly describe the activities you have undertaken.

	YES	NO	WHAT?
Racial minorities			
Immigrants			
Refugees			
Youth			
Women			
Seniors			
Lesbian, gay, bisexual people			
Transgender people			
Aboriginal people			
Families			
People with disabilities			
If yes please elaborate:			

Systemic Gaps and Barriers

What do you think is needed in the community, both specifically around your homelessness-related activities and more generally with respect to homelessness and its root causes? In answering, please also remember that any activities your organization feels forced to do that are beyond what you are officially mandated to do by your funding can also reasonably be considered a gap or a need, and should be listed as such.

Thank you for completing this survey. Please fax or mail to the SPRC by Thursday, December 19, 2002. Fax number: 905-522-9124.

Respondents of the Homelessness Survey #2

Organization
Adolescent Community Care Program
Applegarth Co-operative Homes Inc.
Applegrove Co-operative Homes Inc.
AY Alternatives for Youth
Canadian Mental Health Association
Catholic Family Services
Children's Aid Society of Hamilton
City of Hamilton Mental Health Outreach Team
City of Hamilton Planning and Development Dept. Housing Division
COAST
Community Housing Access Network
Community Information Service
De dwa da dehs nye>s Aboriginal Health Centre
Eagles Cry Ministries
Elizabeth Fry Society – Hamilton Branch
Emergency Food Action Committee
Family Services
First Place (Central Place/Pilgrim Place)
Food Share (Greater Hamilton)
Francophone Community Health Centre
Freedom House
Good Shepherd HOMES Program
Good Shepherd Women's Services
Good Shepherd Youth Services (Brennan House)
Guiding Hands Inc.
Hamilton Accompainment Team
Hamilton Coalition for Social Justice
Hamilton District Health Council
Hamilton East Kiwanis Non-Profit Homes Inc.
Hamilton Habitat for Humanity
Hamilton Housing Coorportion (City Housing Division)
Hamilton Regional Indian Centre
Hamilton Urban Core Community Health Centre
Hamilton Wentworth District School Board
Health and Homelessness Project
Homelessness Initiative Campaign for Adequate Welfare
Homelessness Intervention Project
Hostels and Lodging Homes Unit
Housing Emergency Loan Program
Housing Help Centre
Housing Trust Fund Working Group
Interval House
John Howard Socicty of Hamilton
MAC Door – Making a Change
Mary Ellis House
McMaster Indigenous Studies Program
Mental Health Rights Coalition
Meridan Co-operative Homes Inc.
Metis Nation of Ontario Training Intiatives

Metis Women's Circle
Mission Services Men's Residence (covers Mission Services minus Inasmuch House)
Native Family Foundation
Native Home Providers in Ontario
Native Indian/Inuit Photographer's Association
Native Women's Centre
Neighbour to Neighbour
Niwasa Head Start Preschool
North Hamilton Community Health Centre
Ontario Association of Social Workers
Out of the Cold
Real Option of Support (ROOFS)
Sacajawea Non-Profit Housing
School of Social Work McMaster University
Second Stage Services
SEN Community Link
Settlement and Integration Services Organization (SISO)
Sexual Assualt Centre
Shelter Working Group (Good Shepherd Men's Centre)
Skydragon Centre
Social Planning and Research Counicl of Hamilton (SPRC)
South Gate Presbyterian Church
St. John's Lutheran Church
St. Joseph's Immigrant Women's Centre
Street Outreach Steering Committee
Supported Housing Coordiantion Network
Tabby Town Urban Co-operative Corp.
Tele Touch
Tenant Education Project
The Bridge
The Cottage
The Salvation Army Booth Centre
Tikon Property Maintenance Inc.
Tranistional Youth
Urban Native Homes Inc.
Wellington Psychiatric Outreach Program
Wesley Urban Ministries (Wesley Centre Drop-in)
Wesley Urban Minsitries Youth Shelter
Women's Detox Centre

APPENDIX E:

Emergency Shelter Usage
Comparison 1995, 1998, 2000, 2001,2002
# of People Staying Overnight on a Given Night in Emergency Shelters/ Beds Available
Social Planning and Research Council of Hamilton 2002

Emergency Shelter Usage - Comparison 1995, 1998, 2000, 2001,2002

of People Staying Overnight on a Given Night in Emergency Shelters/ Beds Available

Name of Agency (# beds in 2002)	1995	Nov 1998	March 2000	March 2001	July 2001	Nov 2001	March 2002	July 2002	Nov 2002
Wesley Centre Drop-In (mats)	-	24	50	60	62	67	65*	52*	73
Salvation Army Booth Centre (113)	-	46	63	78	63	91	102*	99*	85
Mission Services Men's Centre (72)	-	25	42	40	40	45	48	53*	63
Good Shepherd Men's Centre (40)	-	19	17	15	27	20	27	28	32
Martha House (28)	-	28	16	29	27	27	27* VAW: 18	29* VAW: 26	27 VAW: 12
Mary's Place (9)	-	9	8	9	9	9	9*	9*	9
Native Women's Centre (11)	-	5	9	12	12	13	11*	11*	8
Interval House (20)	-	9	11	22	20	13	VAW: 23*	VAW: 19*	VAW: 20
Inasmuch House * (20)	-	14	28	30	24	27	27* VAW: 9	27* VAW: 25	19 VAW: 10
Notre Dame House (Youth) (20)	na	na	19	16	20	19	15	18*	20
Wesley/Living Rock Temporary Youth Shelter (15)	--	--	--	--	--	--	--	7	14
Out of the Cold (mats)	na	na	na	17	not open	12	23*	not open	26
Totals	**160**	**172**	**263**	**328**	**304**	**343**	**377**	**352**	**396**
Beds Available	*157*	*192*	*245*	*270*	*264*	*264*	*305*	*321*	*348*

* Due to construction, Inasmuch House temporarily had 8 fewer beds available. They normally have 28 beds, bringing the total available beds in November to 256.

APPENDIX F

Supporting Communities Partnership Initiative (SCPI) Projects including Youth in Hamilton
Human Resources Development Canada (HRDC)
2003

Native Home Providers in Ontario (NHPO) – Hamilton Aboriginal Homelessness Allocation 2001/2002/2003
NHPO
2003

Supporting Communities Partnership Initiative (SCPI) Projects including Youth in Hamilton

The Supporting Communities Partnership Initiative (SCPI) is part of the Federal National Homelessness Initiative. . The following is a list of the projects that have been completed or are currently underway.

Organization	Project	Project Description
Aboriginal Health Centre	Youth Under SCPI Authorities	To identify screen and assist an anticipated 75 Aboriginal youth with Fetal Alcohol Syndromes disorder (FAS) obtain or access either employment, vocational training, voluntary experience or other appropriate supports or services in order to prevent or reduce homelessness. To raise awareness of FAS within Aboriginal and Non Aboriginal youth serving agencies and within the community of Hamilton.
Alternatives for Youth	Youth Under SCPI Authorities	To pay the salary of the Addictions Counsellor and pay for minimal costs for travel and printing material for participants. To provide street involved youth (SIY) with outreach services including education and counselling with the desired outcome of increasing knowledge regarding substance use/abuse, harm reduction and treatment options and to develop a coordinated service delivery model for SIP related to substance use education and counselling.
Children's Aid Society of Hamilton	Short-term Accommodations	This project provides short-term motel accommodations and services to help families find appropriate places to live. It also includes services to ensure housing is safe and clean. The intent is to prevent children from being taken into care due to inappropriate housing or homelessness.
Children's Aid Society of Hamilton	Youth Under SCPI Authorities	To deliver a holistic model of service delivery designed to support and prevent pregnant teens and young mothers who are threatened with homelessness from becoming homelessness. To identify the risk factors that contribute to homelessness among this population and provide a wraparound of service delivery and support by addressing each risk factor in a coordinated fashion based on models of best practice.
City of Hamilton	Community Health Bus	This funding provides additional staffing and supplies to the Community Health Bus, which provides free health services at 5 inner city sites. These services include dental care, immunisations and general health care.
City of Hamilton	Additional Staff	This project funding will provide increased and enhanced services to families and individuals that are homeless or at-risk of homelessness in emergency shelters, hostels and lodging homes.
Ecumenical Downtown Ministries	Urgent Needs	To provide warm winter coats and underwear through the Stone Mason's Cottage "free clothing outlet.
Emergency Shelter Foundation	Second Stage Services Continued Operation	This funding provides transitional housing and counselling to abused women and children. This organization has merged with Family Services.

Organization	Project	Project Description
Emergency Shelter Foundation	Case Management for Transitional Housing Units	This project provides services and supports to facilitate the move from shelters and transitional housing to permanent, sustainable, affordable housing for homeless people or that at-risk of homelessness. This project will also develop a website for service providers and clients.
Family Services of Hamilton	Temporary Emergency Family Shelter	This project provides short-term emergency housing for families in need, to a maximum of 6 weeks. It also includes linking these families to supports, both during and following their stay in the shelter. 10 units, 66 beds.
Good Shepherd Centre	Mary's Place – New Facility	This capital funding project will replace the existing Mary's Place shelter and increase the number of beds from 9 to 20. Mary's Place houses hard to serve homeless women.
Good Shepherd Centre	Case Management - Men's Centre/Mary's Place	This project funding provides enhanced case management for client's of Mary's Place and new case management for client's of the Good Shepherd Centre's Men's Centre. Both are emergency shelters.
Good Shepherd Centre	Trustee Program	Through this funding, voluntary trusteeship services are provided to those who are homeless or at-risk of homelessness allowing them to obtain and retain housing.
Good Shepherd Centre	Urgent Need	Boiler Enhancement: To purchase a second boiler for a youth shelter as their existing boiler is insufficient to provide both heat and hot water to service the youths who are staying at the shelter. 2. Emergency Clothing Program: To supply appropriate clothing to reduce cold weather injuries for those on the streets or in danger of becoming so 3. Emergency Food Enhancement: To meet the food needs of homeless individuals/families or in danger of becoming so.
Good Shepherd Centre	Youth Under SCPI Authorities	Funds will be used to fund a feasibility study for supported housing for parenting teens.
Good Shepherd Centre and Mission Services	Hostel/Shelter Staff Training	This project provides training for shelter and second level housing staff in the city of Hamilton. Training includes topics such as Dealing with Alcoholics and Drug Addicts, Dealing with Angry or Hostile Clients, Domestic Violence and Criminal Harassment, First Aid, etc.
Hamilton Food Share	Resource Development Co-ordinator	This project will fund a full-time staff person dedicated to resource development. Objectives include increasing the volume of food raised and the financial contributions received.
Hamilton Food Share	New Facility Purchase	This capital project will allow Food Share to purchase a new larger facility and thereby maximize their ability to receive and store donated supplies and better serve the community.
Hamilton Food Share	Survey of Food Bank Recipients	This project will fund an in-depth survey of people who access local foodbanks creating a detailed profile of users, severity of hunger, household budgets, etc.
Hamilton Housing	Roofs	This program intends to prevent further homelessness and improve the lives of high risk

Organization	Project	Project Description
Corporation		tenants by providing a residentially based program focused on advocacy, budgeting, life skills development, referrals to community services and crisis intervention.
Hamilton Urban Core Community Health Centre	Enhanced ID Clinic	Funding of the Enhanced ID Clinic allows people that are homeless, at risk of homelessness or low income to replace lost or stolen identification including birth certificates, health cards, SIN cards, citizenship or landing documents.
Hamilton Urban Core Community Health Centre	Urgent Need	To prepare and distribute 200 winter safety kits to homeless individuals, with particular focus on street youth.
Housing Emergency Loan Program	Housing Emergency Loan Program	This program is a community based revolving loan fund that provides interest-free loans to assist people living in the city of Hamilton maintain housing.
Housing Emergency Loan Program	Urgent Need	To administer the Housing Emergency Loan Fund which is a community based revolving loan fund.
Housing Help Centre	214 Napier St. Renovations	These major renovations to the Housing Help Centre will relocate the housing search area and meeting space to the ground floor making it accessible for people with disabilities. The office/work space in the entire Centre will also be more useful. Renovations are currently underway with an expected date of completion in November 2002.
Housing Help Centre	Hamilton Tenant Education Project	This project provides education, outreach and ongoing support to create a better informed tenant population and thereby minimize or prevent homelessness.
Housing Help Centre	Video - "Room at the Inn"	This project includes the production of a 50-minute educational video giving a history of rooming houses and current perspective on people residing in them caught between the streets and adequate housing.
Housing Help Centre	Case Worker	This project funds a caseworker to enhance the agency's ability to connect homeless or underhoused individuals with permanent housing and assist vulnerable clients in maintaining their current housing.
Housing Help Centre	Urgent Need	To assist single individuals to find and maintain housing by hiring a housing Advocacy Worker. To connect these individuals to existing private and non-profit housing stock (particularly rooming houses). To assist individuals in maintaining their tenancies (rent negotiation, education to tenants and landlords etc.). To reduce discrimination that often results in tenants becoming homeless.
Living Rock Ministries	Urgent Need	To reach street involved youth who are unresponsive to traditional supports and offer a place of refuge, safety and shelter. In preparation of the winter "Winter Warm Up " program: To hire a youth worker/coffee house coordinator and one street youth as a coffee house assistant; To winterize the facility and upgrade it to a youth friendly coffee house; To supply warm food, drinks, clothing and other winter supports to the youth.

Organization	Project	Project Description
Living Rock Ministries	Youth Under SCPI Authorities	To hire a Food Service Coordinator and augment current services to better serve at risk youth and to empower youth to improve their health and nutrition. To develop the youth food bank into a bright, hygienic, positive empowering area. To develop a nurse's station and augment health services provided. The nurse currently sees youth in an existing office shared by the bookkeeper and two volunteer staff. To hire a 5FT custodian to augment cleaning services to ensure deep cleaning of all food related and health services areas. To improve Living Rock Resources Centre visibility and signage to facilitate outreach.
Living Rock Ministries	Youth Under SCPI Authorities	Provides a unique, individualized program of supports to 54 high need youth. Youth are involved in a three month intensive case management, skills training and "work to earn" projects that are geared to meet youth's individual needs
Living Rock Ministries	Youth Employment Strategy (YIC)	To assist 30 youth complete the first year of the Tri-Rock Program. To assist youth find and maintain suitable housing during and after the program. To assist youth grow in Self-esteem and life skills. To assist youth find employment and be enrolled in appropriate training by the end of the program.
Living Rock Ministries and Wesley Urban Ministries	Shelter Renovations and Operation	Through this funding, the partner agencies will open and operate a new emergency youth shelter. Funding includes renovations, admin and operational costs. Renovations are under way; expected date of completion is Nov. 2002.
McMaster Student Outreach Clinic	Urgent Need	To hire a part time coordinator of volunteers and to purchase food for the McMaster Student Outreach Clinic: To provide outreach services (food, clothing and health services) in the downtown core and East Hamilton; To solidify and expand the health service function by building strategic alliances with community providers.
McMaster University School of Nursing	Toward a Community Action Plan for Health for the Homeless in Hamilton	This project will complete a comprehensive health needs assessment of people that are homeless to determine the prevalence and priority of health problems, create a community map of current relevant health services, and develop a community action plan for the homeless.
McMaster University School of Nursing and Wesley Urban	MAC Door	The intent of this project is to empower street youth to make lasting changes to get off of the streets. The emphasis is on enabling these youth to make decisions about their own needs and outlining concrete steps to address them.

Organization	Project	Project Description
Ministries		
McQuesten Legal Services and Social Planning & Research Council	Freedom House Report	The intent of this project is to prepare a feasibility study to ascertain the housing needs of people with disabilities in Hamilton, with the objective of developing housing for these people.
Mission Services	Property Purchase and Renovations	This project includes major renovations to the existing men's residence (325 James St. N.) and the new men's residence (the old Jamesville Tavern)
Mission Services	Trusteeship Program	Through this funding, voluntary trusteeship services are provided to those who are homeless or at-risk of homelessness allowing them to obtain and retain housing.
Mission Services	Urgent Needs	To immediately reduce homelessness for men by increasing the number of homeless men able to use Mission Services Men's hostel for a safe shelter by up to 50% (from 60 men per month to 90).
Native Women's Centre	New Facility	This capital project includes the purchase of land, architectural services/plans and a portion of the construction cost of a new Native Women's Centre. This new shelter will have 15 beds, 11 more than the current facility.
Native Women's Centre	Emergency Intervention	Through this project women and their children are provided with emergency vouchers for groceries, health/hygiene items, clothing, school supplies and trips, and other necessities. This voucher system allows families to pay bills and maintain their housing.
Phoenix Place	Transitional Housing Project	This project will allow increased service to client's of Phoenix Place, which provides counselling and transitional housing to victims of domestic violence.
Salvation Army Booth Centre	Architect Fees	This funding paid for the architect fees for the planned renovations of the Salvation Army Booth Centre 94 York Blvd., Hamilton.
Salvation Army Booth Centre	Essential Repairs to the Booth Centre	This capital project will fund essential repairs and renovations to the 50-year-old Salvation Army Booth Centre 94 York Blvd., Hamilton. Renovations are underway; expected date of completion is Nov. 2002.
Salvation Army Booth Centre	Healthcare Evening Clinic	This project provides the services of an onsite nurse practitioner at the Salvation Army Booth Centre Monday to Friday, in the afternoon and evening.
Salvation Army Booth Centre	Soup Van Ministry	This funding allows for the operation of the "Soup Van", a street outreach and food program. This program distributes, soup, sandwiches, beverages, seasonally appropriate clothing and blankets, and provides access to a cell phone.
Salvation Army Booth Centre	Utilities Grant Program	The Utilities Grant Program provides funding and advocacy to those individuals and families in Hamilton, who have been notified of a utilities cut off.
Salvation Army Booth Centre	Moving & Storage Program	This program provides free moving and storage of clothes, household items and furnishings to people who are homeless or underhoused.

Organization	Project	Project Description
Salvation Army Booth Centre	Caseworker	This project funds a caseworker to enhance the agency's ability to connect homeless or underhoused individuals with permanent housing and assist vulnerable clients in maintaining their current housing.
Salvation Army Booth Centre	Trusteeship	Through this funding, voluntary trusteeship services are provided to those who are homeless or at-risk of homelessness allowing them to obtain and retain housing.
Salvation Army Booth Centre	Urgent Need	To identify and then intervene with people/families that are homeless or at risk of becoming homeless by providing a continuum of services which will reduce/remove the risk (outreach, distribution of materials, transportation by services to shelter).
Settlement & Integration Services Organization, Hamilton Urban Core Community Health Centre, Housing Help Centre and St. Matthew's House	Co-ordinated Services	Through 4 partner agencies, this project delivers a co-ordinated approach to delivery of services to families that are homeless or at-risk of homelessness. These services include education, housing search assistance, emergency housing, food security, and health care access.
Social Planning and Research Council	Report Card to the Community	This project provides for research, evaluation, co-ordination and facilitation with respect to housing and homelessness in Hamilton and includes the Report Card on Homelessness and community forums/workshops. The final report card is due in March 2003.
St. Matthew's House	Homelessness Intervention Program for Older Adults	This program provides seniors at risk of homelessness, with transitional housing (apartments) and assistance in moving from transitional housing to permanent housing.
The Bridge: From Prison to Community	Bridge House Purchase and Renovations	The Bridge provides short-term and longer-term transitional housing, and programming and supports, for ex-offenders released from prison. This funding allows for the purchase and renovation of a building and includes increasing the number of beds by 50%.
The Bridge: From Prison to Community	Urgent Needs	To assist ex-offenders returning to the community by providing temporary accommodation and assistance in locating more permanent housing (to provide 2 additional units for transitional accommodation to 36 clients who would otherwise use the hostel system or be on the street).
The John Howard Society of Hamilton	Youth Under SCPI Authorities	To hire a project co-ordinator to co-ordinate a youth self help committee, a youth advisory committee and a youth advisory board. Project objectives are to halt the progressions from street involved youth to homeless youth by empowering at risk individuals to address their issues and concerns with guidance and support to peers and professionals. Project activities will also include the collection, analysis and dissemination of information on youth homelessness.

Organization	Project	Project Description
The John Howard Society of Hamilton	Youth Employment Strategy (YSC)	To provide 16 participants with the opportunity to confirm career plans and acquire valuable work experience. To meet and network with many community service providers which can lead to permanent employment. To assist youth return to school for further education. To provide a breakfast program, evening hot meal program, counselling and referral services, a food bank and employment services.
Wesley Urban Ministries	24 hour Drop-in Centre	This funding covers the cost of one staff position 24 hours per day at the Wesley Centre, the training and all other associated costs. Refer to the following project.
Wesley Urban Ministries	24 Hour Drop-in Centre operation, continued	This funding is a continuation of the 24-hour drop-in project at the Wesley Centre, including a staff person, training and all other associated costs.
Wesley Urban Ministries	Recreation/Common Room Construction and Renovations	This capital funding allows for renovation and upgrade of the current washroom and shower facilities and the addition of a recreation/ smoking room for clients of the Drop-in Centre.
Wesley Urban Ministries	Caseworker	This project funds a caseworker to assist homeless or underhoused clients find permanent housing; and a 1/2 time research position to examine current effectiveness of the shared accommodation housing.
Wesley Urban Ministries	Urgent Need	To maintain 24 hour opening of Wesley Centre through the critical winter period by ensuring coverage from 9 pm to 8 am. To expand shelter space and staff support (hiring of a front line worker) for those who use Wesley Centre as an Emergency Night Shelter. To gather data regarding the increase of persons using the Centre as an Emergency Shelter (hiring of a worker responsible of data collection).
Wesley Urban Ministries	Youth Under SCPI Authorities	To increase the number of shelter spaces available to youth in Hamilton by operating a fifteen bed emergency shelter for youth aged 16 to 25. To reduce the number of youth forced to access the adult shelter system by developing referral processes to lower the number of youth staying in adult shelters such as Wesley Centre thus allowing youth and adult shelter to be more efficient and effective. To develop a multi service agency for youth in Hamilton by coordinating current day and evening programming and provide comprehensive service throughout the week.

NHPO - Hamilton Aboriginal Homelessness Allocation 2001/2002

Organization	Project	Project Description
Metis Women's Circle	Strong Women Caring: An Urban Fanny Pack Project	To produce personal care packages for each woman to a total of 30 packs per month, one package per woman, to be distributed through recognized service organizations
Native Indian/Inuit Photographer's Association	National Aboriginal Day	To share with the whole community a small portion of Aboriginal culture in a two day forum; one, in a downtown venue, the second, in a city park involving all members of the community
Native Indian/Inuit Photographer's Association	Honoring Mother Earth, Spring Social	To host a celebration of the Spring season in a traditional and cultural forum. Inviting people from all walks of life to share in the teachings and values of our Aboriginal culture. To provide a free BBQ to all participants and distribute personal care products to the community homeless. To formally release the report on Aboriginal Homelessness as it pertains to the Hamilton community with a special addition of a press release by the Federal government announcing the funding allocation to the Aboriginal community via the ALFDC and the NHPO.
Hamilton Regional Indian Centre	Emergency Assistance Program	To provide emergency assistance to community families needing supplies such bus tickets for employment interviews, clothing, baby diapers and formula, over the counter medications not covered by OHIP, student assistance for books, student fees, clothing and transportation. Meal allowances, accommodation assistance maximum 7 days to establish an address. In-house meals and coffee for drop-in's requiring an emergency meal/service(s).
Hamilton Regional Indian Centre	Community Food Bank Program	To provide a central area in the community to allow clientele and community members to access perishable and dry goods during any given month when their food supplies run short.
Hamilton Regional Indian	Healthy Aboriginal Men's Circle	To develop a meeting/gathering place to assist community Aboriginal men. To provide culturally relevant and informative workshops/discussion on issues facing men in the prevention of homelessness.
Hamilton Regional Indian Centre	McMaster Community Evaluation Project/Review	To produce a document which reports on the specific projects funded under the HRDC-UAS-H with the New City of Hamilton. Secondly, the project will gather information under the UAS-H to be used as a future resource in HEDAC's Community Strategic Plan for encountering the needs of Aboriginal Homelessness in Hamilton.
Hamilton Regional Indian Centre	Seasonal	To provide seasonal materials such as fans and air conditioners and resources to maintain them for the clientele with special needs, to include those with respiratory and severe health issues. To assist individuals in maintaining their tenancies through advocacy and preventative education.
Aboriginal Health Access	Essential Medical Services	To provide direct service of essential health care products/services for Aboriginal

Centre		homeless, men women and their families that have exhausted all other avenues in accessing health care.
Sacajawea Non-Profit Housing	Tenant Consultation/Survey	To produce and distribute 250 tenant manuals. This project will help sustain permanent housing.
Niwasa Head Start Pre-School	Family Sun Screen and Voucher Outreach Program	To provide 100 families with care packages that include environmental protection products and traditional healing resources. To provide families with vouchers to purchase foods and nutritional supplies that will assist in their child(s) development in their early years.
Guiding Hand	Foster Care	Native foster children are on the edge of homelessness. Our intent is to introduce Aboriginal foster children to culturally based programs that will instill self-esteem and self-identity.
Native Home Providers in Ontario	Taking the "Less" Out of Homelessness Symposium II	To bring together the Aboriginal front-line workers and their administrators that provide services to the Homeless population in Hamilton. Phase II will provide agencies with well-rounded workshops focused on project reporting and general issues relating to promotion of the initiative throughout Hamilton.
Native Home Providers in Ontario	Project Enhancement Services	To assist the LDM & 12 Aboriginal organizations with support in the areas of project enhancement and delivery of allocated funds and reporting requirements.
Vouchers		During the month, many families and single individuals face hardship especially after paying their rent and bills. It is our expectation to provide this little extra "service" as essential needs in order for clients to better manage their livelihood.
NHPO - 2002/2003		
Metis Women's Circle	Strong Women Caring: An Urban Fanny Pack Project	This project will assemble personal care packages for each woman to a total of 33 packages per month, one package per woman, to be distributed through Aboriginal Service organizations, then to other recognized service organizations.
Native Indian/Inuit Photographer's Association	Homeless Communication Strategy	The Native Indian/Inuit Photographer's Association will help to inform our homeless and near homeless community of various programs and services that are offered to assist them, through a newsletter and resource guide while employing a local Aboriginal student.
Native Indian/Inuit Photographer's Association	Homeless Video Documentary	The purpose of this documentary is to show and explore the living conditions that the First nations homeless people in Hamilton have had to endure during their time on the streets. We want to show that these are real people with real problems, who, for whatever reason, are homeless and living on the streets or in shelters around Hamilton.
Hamilton Regional Indian Centre	Healthy Aboriginal Men's Circle	The Health Aboriginal Men's Circle is a volunteer group, set to provide men, within the Aboriginal community, with the means, opportunity, ability and support to develop and rediscover their mental, physical, emotional and spiritual well-being. The mental aspect is the development of awareness of the topics and issues for men. The intention of this project is to foster healthier men, healthier families and ultimately a

		healthier community; therefore involving the whole family and whole community.
Hamilton Regional Indian Centre	Support Services	The project proposed is intended to meet the identified needs of community members who are experiencing difficulty with issues such as having to make choices between paying bills and purchasing food for their families. Our intent is to provide support services to individuals and families in need to assist with alleviating the day to day hardships faced. We propose to offer support programs and services ie. budgeting, temporary one time assistance with rent, utilities or vouchers for food, clothing, diapers, formula or other needs as assessed. We also propose to continue providing outreach services by offering lunches and hygiene kits to individuals on the street which is a means to offer assistance and provide information as to other supports available to assist clients to become more stable. We also wish to provide seasonal supports such as Thanksgiving Dinner, Christmas Dinner, Christmas Hampers and assistance with our Children's Christmas Party. This can all be completed with the assistance of a part-time Homelessness Co-coordinator who will organize, implement and oversee the project.
Hamilton Regional Indian Centre	Evaluation Partnership	Following the release of the Report Card on Homelessness in Hamilton, the SPRC received feedback from members of the Aboriginal community and HEDAC that there was not sufficient content about or analysis of the Aboriginal experience of homelessness in the Report Card.
Native Women's Centre	New and Expanded Emergency Shelter	The priority goal of the proposed project is to build a new and larger facility on an alternative site in the New City of Hamilton to serve 10 residents (abused women) and 5-8 residents who are absolutely homeless. The objectives of the new facility are: ✓ Provide safe, secure emergency housing for Aboriginal and non-Aboriginal women and their children in the City of Hamilton ✓ Create additional 5-8 beds to serve absolutely homeless women and their children ✓ Provide a safe haven and secure environment that protects the resident from her external threat(s) while instilling a process of healing ✓ Facility that is conducive to healing and can accommodate all existing programs the agency provides ✓ Build a fully accessible facility by installing an elevator ✓ Ultimately, the shelter will encourage each resident to re-connect with, and re-establish herself in a life free from violence and/or affordable, appropriate and safe housing
Aboriginal Health Access Centre	Expansion of Traditional Healing	The project expansion of Traditional Healing at De dwa da deh nye>s Aboriginal Health Centre will reduce waiting lists and would increase access to traditional healers. Increase access to Traditional Healing has been well documented via community participation. The Expansion Project will address these needs.

Sacajawea Non-Profit Housing	Tenant Consultation/Survey	Tenant Consultation (Christmas Gathering) to survey tenants/adults & children in Sacajawea Housing. Gathering information regarding high utility costs and services tenants use (long & short term) to help make ends meet: Food banks, Native and Non-native service providers (clothing, school supplies etc.), assisting tenants with life skills and budgeting.
Urban Native Home	Helping Others Maintain Empowerment	UNH plans to contribute to the purchase of warm winter clothing for the children, food vouchers for the families, over the counter drugs and bus tickets. It is our intent to hold a Homeless fair/social and invite the UNH families to come out and pick up their warm clothing voucher, learn about what other services are available through the Aboriginal Homeless funds and last but not least, share a traditional meal. This event will also provide a vehicle for the adults to select warm clothing that will be received through donations. Bus tickets will be available for the participants who are in need at the event or when they come in to pick up food or over the counter drugs.
Urban Native Homes	Utilities Grant Program	UNH on behalf of the Hamilton Executive Directors Aboriginal Coalition will administer a Utility Grant project, assisting community members who are in jeopardy of having their heating or hydro services disconnected. This one time grant will be designed as "matched granting" to a maximum of $600 that will benefit users of the program by getting their utility payments up to date, so those services will not be shut off. To qualify: The recipient(s) must have demonstrated a history of regular payments within the last six months and show correspondence or routine communication with the utility company(s) Household income shall not exceed $35,000. Comply with UNH's in-house data consent and release policies.
Guiding Hand	Foster Care	Restructuring existing operation to better serve the Native community of Hamilton. Part of restructuring will be enhancing community capacity building by providing a service that is non-existent in terms of Native operated and controlled. In terms of research and studies, we will be undertaking the tasks of policy and procedure development for foster care from a Native perspective; and sill fall in line with ministry guidelines. The research involved will be extensive; as we are not aware of it being done prior to now. We will be relying heavily on consultants and a policy analyst to assist in this area. The Program Coordinator will be responsible for coordinating, implementing and blending these activities together. There will be a MCSS application review held in January 2003 and we have set this as our target date.
Native Home Providers in Ontario	Project Services Worker	To provide additional services, such as clerical and other duties in the administrative portion of the 2002/03 Homelessness projects and sponsors of the Hamilton Executive Director's Aboriginal Coalition. To ensure the recommendations and objectives of the community plans are met in both effectiveness and qualitative measures.

APPENDIX 6:

Summary of Aboriginal Planning Documents Related to Homelessness
Complied by: Social Planning and Research Council of Hamilton, 2003

EMERGING THEMES, GAPS/CHALLENGES & RECOMMENDATIONS FROM OTHER ABORIGINAL REPORTS

The Homelessness Trail: The Voice of the People Recommendations

1. Increase access to culture, spiritual and traditional healing.
2. Better coordination among/between mainstream and Aboriginal service providers; thereby providing an opportunity to, incorporate a cultural component in existing services, train mainstream staff to better service Aboriginal clients and assist mainstream agencies in collection of data regarding Aboriginal clients.
3. Have a strong Aboriginal voice on decision-making committees at all levels to ensure the Aboriginal community receives its share of funding, program and services.
4. Prevent people from becoming homeless (both immediate and long term solutions).
5. Develop additional Aboriginal specific programs/services for homeless to fill gaps.
6. Provide temporary, part-time and end of the month supports for relative homeless.

Niagara Peninsula Aboriginal Area Management Board Objectives:

1. Transitional housing support.
2. Outreach.
3. Promotion of community-based partnerships.
4. Advocacy and referral.
5. Mental health support and programming.
6. Cultural, spiritual and traditional programming.
7. Employment skills building.

Emerging Themes Identified By McMaster/HEDAC Evaluation (Freeman, 2003)
(Based on historical spending patterns of the Hamilton Aboriginal Community).

1. Documenting Aboriginal Homelessness.
2. Addressing Basic Needs.
3. Creating Employment Opportunities.
4. Collaboration, Cooperation and Coordination.
5. Cultural Activities and Traditional Teachings - Celebrating Aboriginal Culture & Health and Wellness.
6. "A Sense of Pride" (Self-sufficiency, reconnecting and cultural identity and emotional/spiritual health).
7. Supporting the participation of people with low income in community development, planning and decision-making.
8. Educating the public about the concerns of the Aboriginal community.
9. A lack of adequate resources.

Gaps and Challenges Identified by the McMaster/HEDAC Evaluation (Freeman, 2003)

1. Not enough time, money and staff to complete projects.
2. Lack of communication and recognition with Aboriginal events and information releases.
3. Lack of equal access to funding opportunities with the Hamilton community funding process.
4. Lack of mainstream organizations involvement with Aboriginal organizations, events and projects.
5. Lack of understanding with Government structures, accountability, understanding policies and background information.
6. Duplication of services. Efforts must be made to ensure all needy community members are serviced equally.
7. Lack of capital funding to follow through in the materialization of long term and lasting projects (i.e. Long Term Facility, First Nations Post Secondary Student Residence).
8. Lack of understanding from the Hamilton community of Aboriginal culture, history, beliefs, values and principles.
9. Lack of cultural sensitivity within organizational structures and services regarding Aboriginal clientele.
10. Program was too loosely monitored, lack of record keeping and evaluation process, and not enough accountability (Initial year 1999-2000).
11. Some clients became resourceful in selling and trading vouchers, not using them appropriately.
12. More effort to increase communication between Hamilton Aboriginal community agencies.
13. More effort to increase communication and partnerships with mainstream organizations.

Recommendations of the McMaster/HEDAC Evaluation (Freeman, 2003)

1. Ensure awareness and communication between mainstream and Aboriginal communities regarding projects and services offered in assisting the homeless, i.e. Community Newsletter or Resource Guide.
2. A joint effort in working together for the need of the homeless, i.e. joint referral process and advocacy with mainstream and Aboriginal organizations.
3. Implementing the evaluation process into the planning and implementing of community projects. Develop a useful instrument and methodology that is a natural positive process in assisting with the record keeping of qualitative and quantitative information.
4. More community cultural events to promote and build community through unity, cultural integrity and awareness. Celebrating Aboriginal culture and promoting a "Sense of Pride" within the community.
5. Promote cultural awareness and sensitivity within mainstream community, organizations and agencies regarding Aboriginal culture and perspectives.
6. Outreach to build and nurture partnerships with Aboriginal and mainstream community, organizations and agencies.

7. Aboriginal Community Service Centre in Hamilton - bringing together many of the Aboriginal organizations within Hamilton to one central area.
8. Aboriginal Community Resource Centre in Hamilton. This center would be central and accessible to the community, and provide a place to store HEDAC files and additional information.
9. A template and database for the Aboriginal organizations working with community clientele assisting with eligibility for funding, food vouchers, and community resources.
10. Education, workshops and training in proposal and grant writing for Aboriginal organizations and interested community members.
11. Aboriginal Community Outreach person, to coordinate resource information, assist with planning and implementing events within the community. Also, to keep informed of opportunities and information within the Hamilton community.
12. Community research, which sustains and supports Aboriginal integrity, and preservation of traditional Indigenous knowledge, values and culture.
13. Continue to build and nurture reciprocal relationships with McMaster University and Mohawk College. Thus, community has individuals and students as resources, while students gain valuable skills for the workforce.
14. Additional programming, funding and support towards Aboriginal children and youth, women, single mothers with children, men and the elderly.
15. Funding towards the materialization of Community Facilities i.e., Long Term Care Facility, Post Secondary Student Residence, Aboriginal Youth Centre, Native Women's Shelter, etc.
16. To ensure additional time and funding are allotted to community projects, when addressing the needs and issues of community.
17. Promotion and awareness of a traditional Aboriginal wholistic perspective of health, wellness and healing.
18. Supporting and encouraging the participation of Aboriginal community members in the development, planning and decision-making process within community projects.
19. Additional programming and support in transitional housing for Aboriginal people who are homeless or in a transitional period within their lives (who have been incarcerated, etc.).
20. Additional research, programming and support for Aboriginal individuals experiencing mental health issues and homelessness.

APPENDIX H:

Statistics Canada 2001 Analysis Series
Aboriginal Peoples of Canada: A Demographic Profile
Compiled by: Social Planning and Research Council of Hamilton 2003

Statistics Canada, 2001 Census: Analysis Series
Aboriginal peoples of Canada: A demographic profile

A BRIEF SUMMARY

It should be noted that Statistics Canada does recognize in a section titled 'Under coverage of the Aboriginal Population' that 30 Indian reserves and settlements did not get enumerated. This would therefore affect data re: North American Indians registered under the Indian Act; and was due to lack of participation on reserves. It also states under the 'Definitions' section, "the 'Indian population is relatively young and mobile and thus more likely to be missed by the census".

What Statistics Canada does not state but the Aboriginal community knows; is that Aboriginal people overall (on or off reserve), are less likely to participate in enumeration. This is due to their overall multi-generational mistrust of the government.

With this in mind, the following is a brief summary of this timely report from Statistics Canada.

OVERALL:

- Aboriginal population (pop.) is on the rise; over 1.3 million people (19.8% increase since 1996) reported having some Aboriginal ancestry in 2001 (4.4% of total population); compared to 1996 numbers, which represented 3.8% of the total pop.
- From 1901 to 2001 Aboriginal pop. has increased tenfold, whereas the total pop. of Canada rose only by a factor of six; with a majority of the Aboriginal pop. occurring in the last 50 years (sevenfold vs. Canadian pop. that only doubled).
- 976,305 persons identified as being North American Indian, Metis or Inuit, which is 22% higher than 1996 figures compared to non-Aboriginal pop. that increased only 3.4% in this time.
- Approx. one-half of Aboriginal people (49%) lived in urban areas. On reserve numbers declined from 33% to 31%. 25% (245,000) lived in 10 of nation's 27 census metropolitan areas (CMAs).
- 19.3% (188,315) reporting Aboriginal identity lived in Ontario (highest of all provinces & territories).
- 7,270 or 1.1% of the total pop. in CMA or CA lived in **Hamilton**, compared to 5,460 or 0.9% in 1996.
- One in five Aboriginal people (22% vs. 14 % non-Aboriginal) moved in the past year. 2/3 thirds moved within same community, 1/3 changed communities. Trend since 1981; challenge for areas of education, social services, housing and health care.

ABORIGINAL GROUPS:

- 62% (608,850) North American Indian; 30% (292,310) Metis - with the largest growth, increased 43% since 1996; and 5% (45,040) Inuit. Growth rate can be attributed to higher birth rate and increased awareness of Aboriginal roots.

(North American Indians)

- One-fifth (22% or 131,560) lived in Ontario; 5,600 in Hamilton CMA.
- In Canada less than half (47%) live on reserve. 24% (151,770) lived in one of 27 census metropolitan areas (CMAs).
- Median age was 23.5 years vs. 37.7 years non-Aboriginal pop. (This means 50% less than 23.5 years old). More than 1/3 (35% vs. 19% non-Aboriginal) aged 14 and under.

(Metis)

- Metis population more than doubled in Ontario (17% or 48,345) lived in Ontario; 1,185 lived in Hamilton.
- In Canada more than 2/3 lived an urban area (68%).
- Metis pop. 23% vs. 14% non-Aboriginal changed residences in last year; with an increase to 27% Metis pop. in urban areas moving.
- Median age was 27 (nearly 11 years younger than non-Abor.). 29% vs. 19% non-Abor. Metis children aged 14 and under.

(Inuit)

- 15 Inuit lived in the Hamilton CMA.
- 12% increase (40,220 vs. 45,040) from 1996-2001; whereas non-Abor. pop. only grew 3.4% in same years.
- 19% of Inuit pop. moved within last year; 2/3 moving within same community.
- Median age was 20.6 years (youngest of Aboriginal groups); with 39% Inuit aged 14 and under.

YOUTH:

- Aboriginal pop. much younger than non-Aboriginal pop. Median age of Canada's Aboriginal pop. (24.7 years) is 13 years younger than non-Aboriginal (37.7 years); due to higher birth rate of Aboriginal people.
- One-third of Aboriginal pop. Are aged 14 and under compared to 19% non-Aboriginal; although total Aboriginal pop. was 3.3%, Aboriginal children represented 5.6% of all children in Canada. **They will therefore account for an increasing part of the growth of the working-age population.**
- Aboriginal children (aged 14 and under) are less likely to live with both parents. (CMAs) Aboriginal children 50% vs. 83 % non-Aboriginal children lived with two parents. 46% vs. 17% of non-Aboriginal children lived with one parent. Aboriginal children (CMAs) 5% vs. 0.6% non-Aboriginal lived with a relative other than their parents or with a non-relative.

SENIORS:

- Trend toward aging in Aboriginal pop. due to improving life expectancy and declining birth rate of Aboriginal people; although it is still about 1.5 times that of non-Aboriginal birth rate.
- Aboriginal Seniors 1996-2001 soared by 40% (39,700) the biggest increase, vs. 10% non-Aboriginal (due to improvements in Aboriginal life expectancy). Life expectancy age comparison 1975-2000, Males 59.2 - 68.9 years; Females 65.9 - 76.3 years (approx. 10 years).

- However, Aboriginal Seniors figures still remain low (4% of Aboriginal pop. vs. 13% of non-Aboriginal pop.); due to overall youthfulness of the Aboriginal population.

LANGUAGE:

- Decrease of Aboriginal people that can conduct a conversation in an Aboriginal language (24% compared to 29% in 1996). Decrease of 3.5% also occurred in Aboriginal language as a mother tongue (i.e. First language learned at home).

APPENDIX I

An Assessment of Housing Need Amongst People with Disabilities in Hamilton:
Building Towards Freedom House, 2002
CONCLUSIONS AND RECOMMENDATIONS
Social Planning and Research Council of Hamilton

Housing Need Amongst People with Disabilities
CONCLUSIONS AND RECOMMENDATIONS

In the course of this study, a number of data sources were consulted. This included published sources that were local, provincial, and national in scope, as well as unpublished data from local agencies, and qualitative input from people with disabilities and people who provide services to them. From this breadth of data, it is possible to draw a number of conclusions and make recommendations about the housing needs of people with disabilities in Hamilton.

1. Hamilton needs an increased supply of affordable housing for people with disabilities that is physically modified to remove barriers, and in which residents can access the necessary supports to allow them to remain in their housing.

2. Housing for people with disabilities should be...
   ...located as near as possible to as wide a range of services as possible.
   ...located as near as possible to a public transit stop
   ...designed to allow sheltered access to disability transit vehicles
   ...designed to include sufficient parking for modified vehicles and visiting service providers.
   ...located and designed to give residents safety, security, and privacy
   ...located and designed for maximum integration into the community.
   ...designed to include communal, social space
   ...designed to meet the various specific needs detailed in the report.

3. There needs to be an income support system for people with disabilities that is responsive to need rather than arbitrary details of injury and past work history, that is adequate in the amount it provides, that has a shelter allowance that reflects the actual cost of housing in the community, and that is indexed to inflation.

4. There is need for a source of socialized homemaking services, and improved access to therapeutic services for people with disabilities.

5. Any effort to build housing for people with disabilities should include an innovative and comprehensive mechanism for control of design features by people with disabilities.

6. The physical design and funding mechanisms for housing for people with disabilities should allow housing space to be easily adapted to suit the individual needs of residents.

7. The community-wide response to the housing and support needs of people with disabilities must include a variety of options, and the response in any one project must include a model for funding and delivering supports that accommodates maximum flexibility and responsiveness to need.

8. At a community level, mechanisms must be in place to allow people with disabilities to rapidly and easily leave abusive situations.

9. Any effort to meet the housing and support needs of people with disabilities must include a formal, substantive mechanism not just for consultation with the residents, but control by the residents over housing and service delivery, with sufficient resources to allow them to overcome the barriers to participation faced by some people with disabilities.

APPENDIX J:

Summary Directions
Housing and Support Requirements for People with Severe and Persistent Mental Illness
Hamilton District Health Council, 2001

Summary Directions
Housing and Support Requirements for People with Severe and Persistent Mental Illness

Provision of Affordable Housing

Housing is a shared responsibility and it benefits from shared responsibilities and accountability at all levels of government.

Recommended directions:

1. The Hamilton Community advocate for a national housing policy to provide a framework for a continuum of housing, inclusive of national standards for accessible and affordable housing.

2. The Province of Ontario develop and implement a Provincial housing policy for persons with severe and persistent mental illness to provide a framework for a continuum of affordable housing, inclusive of standards to guide development of housing and supports, consistent with national standards.

3. The Province of Ontario include in its supported housing policy a mix of strategies to increase people's access to safe and secure housing that are consistent with normalization, client dignity and confidentiality, by means of:

    - rent supplements directly administered as an income support program
    - an expanded rent supplement program
    - head leases administered by non profit agencies
    - development of new social housing

4. The City of Hamilton, as part of its new social housing administration and support responsibilities, develop a comprehensive policy on all special needs housing in the community.

Provision of Supports

Recommended directions:

5. The Ministry of Community and Social Services (MCSS) increase the Personal Needs Allowance to $160.00 per month.

6. Provincial/federal ministries responsible review and adjust income supports programs to reflect future and current cost of living i.e. indexing of income support programs.

7. The City of Hamilton:
   - develop and publish a directory of publicly funded residential care facilities describing the availability of homes, housing features and available supports, consistent with choice, normalization and transparency
   - publicize the existing tenant/resident complaints process
   - actively support the development of rehabilitation program foci in new and existing residential care facilities, consistent with best practice for client outcomes (shifting some homes from custodial to supportive housing model)
   - carry out a needs assessment of residents in Residential Care Facilities with a psychiatric label who may need support services but are not currently accessing them.

8. A Lead Agency be identified to provide centralized access to housing and information for people with serious mental illness.

The primary functions of this agency would be:
   - to ensure the system is client centered, friendly
   - provides centralized information on Residential Care Facilities, affordable housing and support programs
   - links private housing (landlords) with support providers to promote appropriate housing opportunities for persons with serious mental illness
   - links with income support programs, rent subsidy programs, and legal clinics
   - assists community agencies with the dissemination of information on available supports to persons with serious mental illness and their families
   - promotes the development of education programs for landlords on how persons with serious mental illness can be supported in the community

9. The Support Housing Coordination Network establish a working group that will develop a plan to increase access to information, within agencies, on self-help, peer support and family support programs.

10. The District Health Council and Regional Psychiatry Program identify planning and policy requirements for expanded meaningful activity opportunities in Hamilton for persons with serious mental illness.

- What is currently available and what are the gaps?
- How are current initiatives facilitating client integration with community?
- What are the barriers to meeting vocational, educational, social and recreational needs?
- In what areas is policy least developed?

11. A joint initiative be undertaken through the District Health Council, City of Hamilton and the Regional Psychiatry Program to assess the efficacy of the range of housing programs in this community:

- What are the desirable local outcomes?
- Are we meeting expected outcomes?
- How efficiently are we meeting outcomes across different housing models?
- How will outcomes be monitored over time?

12. The Central South Mental Health Implementation Task Force develop a strategic plan for a full range of housing and supports for an aging psychogeriatric population with complex physical and mental health needs to allow for continued community residence.